2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005100

Entity Name: ANCHOR CHRISTIAN FELLOWSHIP, INC.

FILED Jan 12, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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RT 4 BOX 2698 16045 SE 71ST TRAIL LAKE BUTLER, FL 32054 LAKE BUTLER, FL 32054

Current Mailing Address: New Mailing Address:

7033 S CR 231 16045 SE 71ST TRAIL LAKE BUTLER, FL 32054 LAKE BUTLER, FL 32054

FEI Number: 06-1694503 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JARVIS, ROBERT D RT 4 BOX 2698 JARVIS, ROBERT D 7066 S CR 231

LAKE BUTLER, FL 32054 US LAKE BUTLER, FL 32054 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: MT () Delete Title: MT (X) Change () Addition

 Name:
 JARVIS, ROBERT D
 Name:
 JARVIS, ROBERT D

 Address:
 RT 4 BOX 2698
 Address:
 7066 S CR 231

 City-St-Zip:
 LAKE BUTLER, FL 32054
 City-St-Zip:
 LAKE BUTLER, FL 32054

Title: MT () Delete Title: MT (X) Change () Addition

Name:JENKINS, MICHAEL NName:PARRISH, BRAD RAddress:RT 4 BOX 2698Address:PO BOX 430

City-St-Zip: LAKE BUTLER, FL 32054 City-St-Zip: LACROSSE, FL 32658

Title: MT () Delete Title: () Change () Addition

 Name:
 ROBERTS, TONY C
 Name:

 Address:
 RT 2 BOX 2764
 Address:

 City-St-Zip:
 LAKE BUTLER, FL 32054
 City-St-Zip:

Title: MT () Delete Title: () Change () Addition

 Name:
 PRESTON, RONNIE L
 Name:

 Address:
 512 SE WALDRON TERR
 Address:

 City-St-Zip:
 LAKE CITY, FL 32025
 City-St-Zip:

Title: MT () Delete Title: () Change () Addition

 Name:
 SMITH, BRUCE A
 Name:

 Address:
 RT 3 BOX 1540-C
 Address:

 City-St-Zip:
 LAKE BUTLER, FL 32054
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT D. JARVIS PRES 01/12/2006