2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003638

FILED Apr 20, 2005 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF ARCHER, FLORIDA, INC.

Current Pi	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
CORNER (P.O. BOX 2 ARCHER,	248	AND OAK STREETS			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
CORNER OF CHURCH AND OAK STREETS P.O. BOX 248 ARCHER, FL 32618					
El Number:	59-2001884	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
ASBELL, LAMAR SR. 18908 S.W. 186TH STREET ARCHER, FL 32618 US					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, n the State of Florida.					
SIGNATURE:					
	Electror	nic Signature of Registered Agen	t	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:	T () ASBELL, LAMA P.O. BOX 212 ARCHER, FL 3	N/A	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Nddress: Dity-St-Zip:	T () MORRIS, LERG PO BOX 191 ARCHER, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	T () BROCKMAN, J 11808 SW 156 ARCHER, FL 3	TH ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: Dity-St-Zip:	T () HODGES, IRA 1109 N. UNIV. A ARCHER, FL 3	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	T () BLACKWELL, A 15715 SW 59 A ARCHER, FL 3	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: Dity-St-Zip:	T () SPRINGS, CLA 13091 NE 107 ARCHER, FL 3	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDY BLACKWELL MR. 04/20/2005