

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90068 049 ****61.25

DOCUMENT # N97000002781
 1. Entity Name
ARC INDIAN RIVER HOUSING, INC.



40111604

Principal Place of Business
1375 16TH AVENUE
VERO BEACH, FL 32960

Mailing Address
1375 16TH AVENUE
VERO BEACH, FL 32960



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02272007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
59-3454644

Applied For
 Not Applicable

City & State

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BAKER, ROGER
1375 16TH AVENUE
VERO BEACH, FL 32960

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROODE, LINDA	
STREET ADDRESS	4465 11TH PLACE SW	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRACKINS, REESE	
STREET ADDRESS	2031 INDIAN RIVER BLVD	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE	O	<input type="checkbox"/> Delete
NAME	BAKER, ROGER	
STREET ADDRESS	1375 16TH AVENUE	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHENNULT, SUSAN	
STREET ADDRESS	275 DATE PALM RD #601	
CITY-ST-ZIP	VERO BEACH, FL 32963	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Roger D. Baker, E.D., CEO* **3-21-07** **(772) 562-6854**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #