

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000121240

Entity Name: ARCHER ELLISON, INC.

FILED
Oct 13, 2005
Secretary of State

Current Principal Place of Business:

6479 EVERINGHAM LANE
SANFORD, FL 32771

New Principal Place of Business:

P.O. BOX 5795
WINTER PARK, FL 32793

Current Mailing Address:

6479 EVERINGHAM LANE
SANFORD, FL 32771

New Mailing Address:

P.O. BOX 5795
WINTER PARK, FL 32793

FEI Number: 01-0551071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ANGELO, ALLEN
6479 EVERINGHAM LANE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

D'ANGELO, ALLEN
7025 CR 46A
LAKE MARY, FL 32746 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:

10/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: D'ANGELO, ALLEN
Address: 6479 EVERINGHAM LANE
City-St-Zip: SANFORD, FL 32771

Title: V () Delete
Name: D'ANGELO, KIMBERLY
Address: 6479 EVERINGHAM LANE
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: D'ANGELO, ALLEN
Address: 6479 EVERINGHAM LANE
City-St-Zip: SANFORD, FL 32771

Title: T () Delete
Name: D'ANGELO, ALLEN
Address: 6479 EVERINGHAM LANE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: D'ANGELO, ALLEN
Address: P.O. BOX 5795
City-St-Zip: WINTER PARK, FL 32793

Title: V (X) Change () Addition
Name: D'ANGELO, KIMBERLY
Address: P.O. BOX 5795
City-St-Zip: WINTER PARK, FL 32793

Title: S (X) Change () Addition
Name: D'ANGELO, ALLEN
Address: P.O. BOX 5795
City-St-Zip: WINTER PARK, FL 32793

Title: T (X) Change () Addition
Name: D'ANGELO, ALLEN
Address: P.O. BOX 5795
City-St-Zip: WINTER PARK, FL 32793

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN D'ANGELO

P

10/13/2005

Electronic Signature of Signing Officer or Director

Date