


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90144 039 ***158.75

DOCUMENT # P97000010346	
1. Entity Name ARCHER ROAD PROPERTIES, INC.	

Principal Place of Business 107 E HIGH STREET 16538 SW Co. Rd. 346 ARCHER, FL 32618	Mailing Address P.O. BOX 368 ARCHER, FL 32618-0368
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DO NOT WRITE IN THIS SPACE



01102005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3425253	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILLIAMS, THOMAS JR 107 E HIGH STREET 16538 SW County Rd 346 ARCHER, FL 32618

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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 if applicable, (P/C/E): Registered Agent signature required when consisting)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CP WILLIAMS, JR T 107 E HIGH ST 16538 SW. County Rd. 346 ARCHER, FL 32618
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DAVIS, JR W 107 E HIGH ST 16538 SW. County Rd. 346 ARCHER, FL 32618
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE

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

SIGNATURE:  (352) 495-3006
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR