

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722549

FILED
Apr 26, 2010
Secretary of State

Entity Name: WASHINGTON ARMS MANAGEMENT, INC.

Current Principal Place of Business:

190 E. OLMSTEAD DR.
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

190 E. OLMSTEAD DR.
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-1449619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, SUZI
190 E OLMSTEAD DRIVE G-4
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

VAN COTT, VICKI
190 E OLMSTEAD DRIVE H-10
TITUSVILLE, FL 32780 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: VICKI VAN COTT

04/26/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: COHEN, EDGAR
Address: 190 E. OLMSTEAD F-29
City-St-Zip: TITUSVILLE, FL 32780

Title: S
Name: JONES-PHILLIP, ALLYSON
Address: 190 E OLMSTEAD DR H-12
City-St-Zip: TITUSVILLE, FL 32780

Title: VP
Name: SHAFER, LORENE
Address: 190 E. OLMSTEAD DR. F-6
City-St-Zip: TITUSVILLE, FL 32780

Title: P
Name: VAN COTT, VICKI
Address: 190 E. OLMSTEAD DR. H-10
City-St-Zip: TITUSVILLE, FL 32780

Title: T
Name: SHAFER, LORENE
Address: 190 E. OLMSTEAD DR. F-6
City-St-Zip: TITUSVILLE, FL 32780

Title: D
Name: SELLERS, BRUCE
Address: 190 E OLMSTEAD DR . I-1
City-St-Zip: TITUSVILLE, FL 32780

I hereby 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 all other like empowered.

SIGNATURE: VICKI VAN COTT

P

04/26/2010

Electronic Signature of Signing Officer or Director

Date