

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000009841

**FILED**  
**Mar 10, 2015**  
**Secretary of State**  
**CC7223229579**

**Entity Name:** ARMSTRONG WININGS INVESTMENT MANAGEMENT CORP

**Current Principal Place of Business:**

225 LIVE OAKS BLVD.  
CASSELBERRY, FL 32707

**Current Mailing Address:**

2740 JADE CIRCLE  
SHAKOPEE, MN 55379

**FEI Number: 27-4749703**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ARMSTRONG, BRENT M  
225 LIVE OAKS BLVD.  
CASSELBERRY, FL 32707 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name ARMSTRONG, BRENT M  
Address 2256 LELAND LANE  
City-State-Zip: CASSELBERRY FL 32707

Title P  
Name WININGS, CHAD D  
Address 2740 JADE CIRCLE  
City-State-Zip: SHAKOPEE MN 55379

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

**SIGNATURE: CHAD WININGS**

**PRESIDENT**

**03/10/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date