

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000042264

**FILED  
Feb 06, 2019  
Secretary of State  
6531852444CC**

**Entity Name:** LELANTOS ARMOR INC

**Current Principal Place of Business:**

2850 34TH STREET NORTH  
365  
SAINT PETERSBURG, FL 33713

**Current Mailing Address:**

132 JOE KNOX AVE  
SUITE 100  
MOORESVILLE, NC 28117 US

**FEI Number:** 82-4760909

**Certificate of Status Desired:** No

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

STROHL, MICHAEL P  
2850 34TH STREET NORTH  
#365  
SAINT PETERSBURG, FL 33713 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            CEO  
Name            STROHL, MICHAEL P  
Address        132 JOE KNOX AVE, SUITE 100  
City-State-Zip: MOORESVILLE NC 28117

Title            VP  
Name            STROHL, DEREK P  
Address        132 JOE KNOX AVE, SUITE 100  
City-State-Zip: MOORESVILLE NC 28117

Title            COO  
Name            BARB, JOHN R  
Address        132 JOE KNOX AVE, SUITE 100  
City-State-Zip: MOORESVILLE NC 28117

Title            DIR  
Name            NICOLAI, MONIQUE T  
Address        132 JOE KNOX AVE, SUITE 100  
City-State-Zip: MOORESVILLE NC 28117

Title            DIR  
Name            GEORGE, DONNIE  
Address        132 JOE KNOX AVE, SUITE 100  
City-State-Zip: MOORESVILLE NC 28117

*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:** MICHAEL P STROHL

**CHIEF EXECUTIVE  
OFFICER**

**02/06/2019**

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

\_\_\_\_\_  
Date