2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 15, 2001 8:00 am **DOCUMENT # 850453 Secretary of State** 1. Entity Name ARMSTRONG-HUNT, INC. 02-15-2001 90024 004 ***150.00 Principal Place of Business Mailing Address 8100 ARMSTRONG ROAD 8100 ARMSTRONG ROAD MILTON FL 32583 MILTON FL 32583 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 38-2282032 Not Applicable Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SHOUPPE, GREGORY A Street Address (P.O. Box Number is Not Acceptable) 233 QUEEN STREET MILTON FL 32570 Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Atter MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. X Addition TITLE P ☐ Change K Delete TITLE NAME NAME LEVESQUE, CLAUDE O'DELL, LAWRENCE R. STREET ADDRESS STREET ADDRESS 8100 ARMSTRONG ROAD 8100 ARMSTRONG ROAD CITY-ST-ZIP CITY-ST-ZIP MILTON FL MILTON, FL 32583 Change ■ Addition ☐ Delete TITLE TITI F NAME NAME BLOSS, DOUGLAS V. STREET ADDRESS STREET ADDRESS 2081 SE OCEAN BLVD., 4TH FLR CITY-ST-ZIP CITY-ST-7IP STUART FL Delete **Change** Addition TD TITLE TITLE NAME NAME GIBSON, STEPHEN P. GIBSON, STEPHEN P. STREET ADDRESS STREET ADDRESS 2081 SE OCEAN BLVD, 4TH FLOOR 2081 SE OCEAN BLVD., 4th FLOOR CITY-ST-ZIP CITY-ST-ZIP STUART FL STUART, FL 34996 TIDE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME SHOUPPE, GREGORY A. STREET ADDRESS STREET ADDRESS 233 QUEEN STREET CITY-ST-ZIP CITY-ST-ZIP MILTON FL ☐ Change **X**Addition TITLE ☐ Delete TITLE ARMSTRONG, DAVID M. NAME NAME STREET ADDRESS 2081 SE OCEAN BLVD., 4th FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STUART, FL 34996 ☐ Delete TITLE Change Addition TITLE NAME NAME MORRIS, TOM STREET ADDRESS STREET ADDRESS 2081 SE OCEAN BLVD., 4th FLOOR CITY-ST-ZIP CITY-ST-ZIP STHART. FI. 34996

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: A Shoupe GREGO: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR GREGORY A. SHOUPPE 850-626-0051