

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003858

Entity Name: ARMSTRONG SERVICE, INC.

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

8615 COMMODITY CIRCLE
17
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

8615 COMMODITY CIRCLE
17
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-3405352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, J. THOMAS
2081 E. OCEAN BLVD.
STUART, FL 34996 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BLOSS, DOUGLAS V
Address: 2081 E. OCEAN BLVD.
City-St-Zip: STUART, FL 34996

Title: AT () Delete
Name: KEALY, JOHN F
Address: 8615 COMMODITY CIRCLE, STE 17
City-St-Zip: ORLANDO, FL 32819

Title: VPD () Delete
Name: ARMSTRONG, DAVID M
Address: 2081 E. OCEAN BLVD.
City-St-Zip: STUART, FL 34996

Title: VPD () Delete
Name: ARMSTRONG, PATRICK B
Address: 2081 E. OCEAN BLVD.
City-St-Zip: STUART, FL 34996

Title: S () Delete
Name: MORRIS, J. THOMAS
Address: 2081 E. OCEAN BLVD.
City-St-Zip: STUART, FL 34996

Title: T () Delete
Name: GIBSON, STEPHEN P
Address: 2081 E. OCEAN BLVD.
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MUSSON, DANIEL
Address: 816 MAPLE STREET
City-St-Zip: THREE RIVERS, MI 49093

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN F. KEALY

AT

04/23/2008

Electronic Signature of Signing Officer or Director

_____ Date