2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006670

Entity Name: R.W. ARMSTRONG & ASSOCIATES, INC.

FILED Apr 24, 2008 Secretary of State

O 4 D-		of Business	Name Britan	tool Black of Business	
Current Principal Place of Business: 300 S. MERIDIAN			New Princ	New Principal Place of Business:	
	OLIS, IN 4622	5			
Current Mailing Address:			New Mailir	New Mailing Address:	
300 S. MEF INDIANAP(RIDIAN OLIS, IN 4622	5			
FEI Number:	35-1062227	FEI Number Applied For()	FEI Number Not Appli	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAI ON, FL 33324	ND ROAD			
	named entity s of Florida.	submits this statement for the p	urpose of changing it	s registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	nt	Date	
Election Can	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	C () WADE, JAMES 300 S. MERIDIA INDIANAPOLIS	AN.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () SALMAN, ROLA 300 S. MERIDIA INDIANAPOLIS	AN.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () WADE, JOSEP 300 S. MERIDIA INDIANAPOLIS	AN	Title: Name: Address: City-St-Zip:	S (X) Change () Addition WADE, JOSEPH D 300 S. MERIDIAN INDIANAPOLIS, IN 46225	
Title: Name: Address: City-St-Zip:	SKILLMAN, MA	OCKY POINT DRIVE, STE. 910	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () PAHUD, MICHA 300 S. MERIDIA INDIANAPOLIS	AN .	Title: Name: Address: City-St-Zip:	V (X) Change () Addition PAHUD, MICHAEL 300 S. MERIDIAN INDIANAPOLIS, IN 46225	

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: MICHAEL PAHUD V 04/24/2008