

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052152

FILED  
May 01, 2008  
Secretary of State

Entity Name: ARMSTRONG BAY CROSSROADS DEVELOPMENT, LLC

**Current Principal Place of Business:**

13801 NORTH DALE MABRY HIGHWAY  
SUITE 200  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

13801 NORTH DALE MABRY HIGHWAY  
SUITE 200  
TAMPA, FL 33618

**New Mailing Address:**

ONE ARMSTRONG PLACE  
BUTLER, PA 16001

FEI Number: 55-0879165      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

NATIONAL REGISTERED AGENTS, INC.  
C/O AG ARMSTRONG DEVELOPMENT, LLC  
2731 EXECUTIVE PARK DR., SUITE 4  
WESTON, FL 33331 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GOINS, ALLEN  
Address: 13801 NORTH DALE MABRY HIGHWAY, SUITE 200  
City-St-Zip: TAMPA, FL 33618

Title: MGR ( ) Delete  
Name: CAMPBELL, KIRBY J  
Address: ONE ARMSTRONG PLACE  
City-St-Zip: BUTLER, PA 16001

Title: MGR ( ) Delete  
Name: SEDWICK, DRU A  
Address: ONE ARMSTRONG PLACE  
City-St-Zip: BUTLER, PA 16001

Title: MGR ( ) Delete  
Name: JAMIESON, DAVID R  
Address: ONE ARMSTRONG PLACE  
City-St-Zip: BUTLER, PA 16001

Title: MGRM ( ) Delete  
Name: AG ARMSTRONG DEVELOP, MENT, LLC  
Address: 13801 N DALE MABRY HWY, SUITE 200  
City-St-Zip: TAMPA, FL 33618

Title: MGRM ( ) Delete  
Name: ARMSTRONG FLORDIA RE, ALTY HOLDING, L LC  
Address: ONE ARMSTRONG PLACE  
City-St-Zip: BUTLER, PA 16001

**ADDITIONS/CHANGES:**

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: MGR (X) Change ( ) Addition  
Name: CIPOLETTI, BRYAN  
Address: ONE ARMSTRONG PLACE  
City-St-Zip: BUTLER, PA 16001

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DRU A. SEDWICK

MGR

05/01/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date