2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081457

Entity Name: ARMSTRONG ARMENIA CROSSING DEVELOPMENT, LLC

FILED Sep 06, 2006 Secretary of State

Current Principal Place of Business:		New Princip	New Principal Place of Business:	
13801 NO TAMPA, F	RTH DALE MABRY HWY., SUITE 200 L 33618			
Current Mailing Address:		New Mailing	New Mailing Address:	
13801 NORTH DALE MABRY HWY., SUITE 200 TAMPA, FL 33618			ONE ARMSTRONG PLACE BUTLER, PA 16001	
In accordan	: 59-3746095 FEI Number Applied For () ice with s. 607.193(2)(b), F.S., the limited liability compa I Address of Current Registered Agent:			
AG ARMSTRONG DEVELOPMENT, LLC 13801 NORTH DALE MABRY HWY., SUITE 200 TAMPA, FL 33618 US		2731 EXECU	NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331 US	
	e named entity submits this statement for the pur e of Florida.	pose of changing its	registered office or registered agent, or both,	
SIGNATURE: EDDY SALDANA			09/06/2006	
	Electronic Signature of Registered Agent		Date	
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CH	ANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete GOINS, ALLEN 13801 N. DALE MABRY HWY, SUITE 200 TAMPA, FL 33618	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete CAMPBELL, KIRBY J ONE ARMSTRONG PLACE BUTLER, PA 16001	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete SEDWICK, DRU A ONE ARMSTRONG PLACE BUTLER, PA 16001	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete JAMIESON, DAVID R ONE ARMSTRONG PLACE BUTLER, PA 16001	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Name: A	MGRM () Change (X) Addition AG ARMSTRONG DEVELOP, MENT, LLC I3801 N DALE MABRY HWY SUITE 200 FAMPA, FL 33618	
Title: Name: Address: City-St-Zip:	() Delete	Name: E Address: E	MGR () Change (X) Addition BALDWIN, W. GREGG BIRMINGHAM TOWERS, 2100 WHARTON STREET PITTSBURGH, PA 15203	

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID R. JAMIESON MGR 09/06/2006