2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2007
Secretary of State

DOCUMENT# L04000091749

Entity Name: ARMSTRONG RELOCATION COMPANY, ORLANDO, LLC

Current Principal Place of Business:

9550 PARKSOUTH CT
SUITE 250
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

9550 PARKSOUTH CT
SUITE 250
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 20-1998284 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MESCIA, ROBERT
9550 PARKSOUTH CT
SUITE 250
ORLANDO, FL 32837 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

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	HINKLEY, TOM	
Address:	2490 PRINCIPAL ROW, SUITE 100	
City-St-Zip:	ORLANDO, FL 32837	
Title:	MGR	( ) Delete
Name:	FIELDS, KAREN S	
Address:	3927 WINCHESTER ROAD	
City-St-Zip:	MEMPHIS, TN 381184994	
Title:	MGR	( ) Delete
Name:	PICKENS, LAUREN S	
Address:	3927 WINCHESTER ROAD	
City-St-Zip:	MEMPHIS, TN 381184994	
Title:	MGR	( ) Delete
Name:	RATTON, ROBERT W JR.	
Address:	3927 WINCHESTER ROAD	
City-St-Zip:	MEMPHIS, TN 381184994	

ADDITIONS/CHANGES:

Title:	MGR	(X) Change ( ) Addition
Name:	HINKLEY, TOM	
Address:	9550 PARKSOUTH CT STE 250	
City-St-Zip:	ORLANDO, FL 32837 83	
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 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: TOM HINKLEY MGR 01/05/2007

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