

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012137

FILED
Jul 05, 2006
Secretary of State

Entity Name: ARMONIA U.S., INC.

Current Principal Place of Business:

5576 MILLBROOK DRIVE
WILLIAMSBURG, MI 49690 US

New Principal Place of Business:

Current Mailing Address:

5576 MILLBROOK DRIVE
WILLIAMSBURG, MI 49690 US

New Mailing Address:

FEI Number: 20-2302015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WHITE, W. GRAHAM
250 PARK AVENUE SOUTH
5TH FLOOR
WINTER PARK, FL 32789 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

OFFICERS AND DIRECTORS:

Title: DR. () Delete
Name: HAWKINS, LEE W PRES
Address: 5576 MILLBROOK DRIVE
City-St-Zip: WILLIAMSBURG, MI 49690 US

Title: DR. () Delete
Name: ZIEGLER, KAREN B TREAS
Address: 114 SATSUMA DRIVE
City-St-Zip: ALTAMONTE, FL 32714 US

Title: MR. () Delete
Name: MATTHEWS, OWEN VP
Address: 2034 COVE TRAIL
City-St-Zip: WINTER PARK, FL 32789 US

Title: MS. () Delete
Name: HAWKINS, JANE A SECR.
Address: 5576 MILLBROOK DRIVE
City-St-Zip: WILLIAMSBURG, MI 49690 US

Title: MR. () Delete
Name: GRIFFITH, CHARLES
Address: 185 ST. ANDREWS DRIVE
City-St-Zip: FRANKLIN, TN 37069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE W. HAWKINS

PRES

07/05/2006

Electronic Signature of Signing Officer or Director

Date