

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005251

FILED  
Jan 07, 2006  
Secretary of State

**Entity Name:** THE DARRELL ARMSTRONG FOUNDATION FOR PREMATURE BABIES, INC.

**Current Principal Place of Business:**

228 DAVENTRY DRIVE  
DEBARY, FL 32713

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 608833  
ORLANDO, FL 32860

**New Mailing Address:**

**FEI Number:** 59-3620145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHUFFIELD, W. CHARLES ESQ  
GATEWAY CENTER 1000 LEGION PLACE  
SUITE 1700  
ORLANDO, FL 32801 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: D ( ) Delete  
Name: ARMSTRONG, DARRELL  
Address: PO BOX 608833  
City-St-Zip: ORLANDO, FL 32810

Title: D ( ) Delete  
Name: RASCOE, THOMAS  
Address: PO BOX 608833  
City-St-Zip: ORLANDO, FL 32860

Title: D ( ) Delete  
Name: KUCK, PAUL  
Address: 2300 JETPORT DRIVE  
City-St-Zip: ORLANDO, FL 32809

**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:

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: THOMAS L. RASCOE JR

D

01/07/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date