

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2002 8:00 am
Secretary of State

01-25-2002 90017 029 ***150.00

DOCUMENT # P01503

1. Entity Name
ARMSTRONG INTERNATIONAL, INC.

Principal Place of Business

**900 MAPLE ST
 3 RIVERS MI 49093**

Mailing Address

**2081 E. OCEAN BLVD
 STUART FL 34996**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **38-0308010**

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GIBSON, STEPHEN P
 2081 SE OCEAN BLVD 4TH FLOOR
 4TH FLOOR
 STUART FL 34996**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	ARMSTRONG, MERRILL H	
STREET ADDRESS	2081 SE OCEAN BLVD	
CITY-ST-ZIP	STUART, FL 34996	
TITLE	VT	<input type="checkbox"/> Delete
NAME	GIBSON, S P	
STREET ADDRESS	2081 SE OCEAN BLVD	
CITY-ST-ZIP	STUART FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ARMSTRONG, DAVID M	
STREET ADDRESS	2081 SE OCEAN BLVD	
CITY-ST-ZIP	STUART FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ARMSTRONG, PATRICK B	
STREET ADDRESS	2081 SE OCEAN BLVD	
CITY-ST-ZIP	STUART FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	BLOSS, DOUGLAS V	
STREET ADDRESS	2081 SE OCEAN BLVD	
CITY-ST-ZIP	STUART, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen P. Gibson, Treasurer 1/7/02 561-286-7175
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)