2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 22, 2004 8:00 am Secretary of State

386-427-1485

DOCUMENT # P02000029264 1. Entity Name ARMSTRONG & SONS, INC.							03-22-2004 90079 039 ***150.00				
Principal Place of Business 480 N. CAUSEWAY NEW SMYRNA BEACH, FL 32169			Mailing Address 238 KIRKLAND RD. NEW SMYRNA BEACH, FL 32169				COMO NEN OSMI SOM ESIM	1 30 71 3 11616 1 0 716	AIDIL EXII OX	 T.B. 13.B	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02252004	Chg-P	CR2E034	(10/03)		
City & State			City & State		4. FEI Numbe 01-063				plied For t Applicable		
Zip	Country		Zip Count		try	5. Certificate of Status Desired See Required Fee Required					
	6. Name	and Address of Current	7. Name and Address of New Registered Agent								
SPENCE.	⊔ Δ1		Name								
221 N. CAUSEWAY NEW SMYRNA BEACH, FL 32169					Street Address (P.O. Box Number is Not Acceptable)						
					City			FL	Zip Code	e	
6 The above	named antit	n a chaoita thia atatamant fa	r the number of changing its	alatar	ad affice or register	rad agent or bar	the in the Ctate of Ele		milian with	and account	
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. I am familiar with, and accept the obligations of registered agent.											
			•				•				
SIGNATURESignature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requirements)								DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financia Trust Fund Contribution.						.00 May Be led to Fees				-	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS,	CHANGES TO OFF	ICERS AND D	IRECTORS	S IN 11	
TITLE VIAME STREET ADDRESS CITY-ST-ZIP	239 KIRK	ONG, JEFFREY L LAND RD. YRNA BEACH, FL 3210	□ Delete					Ţ	☐ Change	Addition	
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NAME	ARMSTR	ONG, JEFFREY L	Boloto	NAM	ļ.			•			
STREET ADDRESS					ET ADDRESS						
CITY-ST-ZIP	ST-ZIP NEW SMYRNA BEACH, FL 32169									····	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											

JEFFORY Armstrong AND USIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER ORDINECTOR