

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000125438

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** ARMADA MANAGEMENT GROUP, INC.

**Current Principal Place of Business:**

1594 ENSENADA DRIVE  
SUITE100  
ORLANDO, FL 32825

**New Principal Place of Business:**

1594 ENSENADA DRIVE  
ORLANDO, FL 32825

**Current Mailing Address:**

1594 ENSENADA DRIVE  
SUITE 100  
ORLANDO, FL 32825

**New Mailing Address:**

1594 ENSENADA DRIVE  
ORLANDO, FL 32825

**FEI Number:** 61-1432361

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NICHOLOFF, JAMES D PRES  
1594 ENSENADA DRIVE SUITE 100  
ORLANDO, FL 32825 US

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

NICHOLOFF, JAMES D PRES  
1594 ENSENADA DRIVE  
ORLANDO, FL 32825 US

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:** JAMES D NICHOLOFF

04/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** NICHOLOFF, JAMES D PRES.  
**Address:** 1594 ENSENADA DRIVE  
**City-St-Zip:** ORLANDO, FL 32825

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JAMES D NICHOLOFF

PRES

04/25/2011

Electronic Signature of Signing Officer or Director

Date