

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072691

FILED
Mar 24, 2006
Secretary of State

Entity Name: AMERICAN ARMS AND ORDNANCE, INC.

Current Principal Place of Business:

3113 SE 8 PL
CAPE CORAL, FL 33904

New Principal Place of Business:

1248 FARGO DRIVE
MELBOURNE, FL 32940

Current Mailing Address:

3113 SE 8 PL
CAPE CORAL, FL 33904

New Mailing Address:

1248 FARGO DRIVE
MELBOURNE, FL 32940

FEI Number: 74-3106974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWEN, MARK D SQUIRE
STEARNS WEAVER MILLER WEISSLER ALHADEFF &
SITTERSON, P.A., 200 E BROWARD BLVD STE 1900
FT LAUDERDALE, FL 33301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: POFF, CHARLES JR
Address: 3113 SE 8 PL
City-St-Zip: CAPE CORAL, FL 33904

Title: T () Delete
Name: LEHIGH, STANLEY
Address: 138 STANWOOD LANE
City-St-Zip: MANLIUS, NY 13104

Title: D () Delete
Name: PALMISANO, LOUIS DR.
Address: 93 SMITH MOUNTAIN RD.
City-St-Zip: WAPWALLOPEN, PA 18660

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: POFF, CHARLES JR
Address: 1248 FARGO DRIVE
City-St-Zip: MELBOURNE, FL 32940

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

SIGNATURE: CHARLES R. POFF JR.

DP

03/24/2006

Electronic Signature of Signing Officer or Director

Date