

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000095554

Entity Name: ARMSTRONG DENT CO.

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

831 MAZURKA DR.  
CHULUOTA, FL 32766

**New Principal Place of Business:**

774 NE 938TH AVE  
BRANFORD, FL 32008

**Current Mailing Address:**

831 MAZURKA DR.  
CHULUOTA, FL 32766

**New Mailing Address:**

774 NE 938TH AVE  
BRANFORD, FL 32008

FEI Number: 33-1072758

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEAD, MICHAEL  
831 MAZURKA DR.  
CHULUOTA, FL 32766 US

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

MEAD, MICHAEL  
774 NE 938TH AVE  
BRANFORD, FL 32008 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:

02/07/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MEAD, MICHAEL  
Address: 774 NE 938 AVE  
City-St-Zip: BRANFORD, FL 32008

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: MICHAEL MEAD

D

02/07/2012

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

\_\_\_\_\_  
Date