## 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 19, 2008 8:00 am Secretary of State **DOCUMENT # P04000018993** 1. Entity Name 02-19-2008 90029 041 \*\*\*150.00 ARMSTEAD ELECTRIC, INC. Principal Place of Business Mailing Address 2108 15TH STREET EAST BRADENTON FL 34207 2108 15TH STREET EAST BRADENTON FL 34207 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 20-0664221 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ARMSTEAD, WILLIAM M JR Street Address (P.O. Box Number is Not Acceptable) 2108 15TH STREET EAST **BRADENTON FL 34207** Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or poth, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent aignature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Addition NAME ARMSTEAD, WILLIAM M JR NAME 2108 15TH STREET EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34207** CITY-ST-ZIP ☐ Delete TITLE IIILE ☐ Change ☐ Addition SAMUEL, ARTHUR C NAME STREET ADDRESS 1114 27TH ST EAST STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34208** CITY-ST-ZIP 🔀 Delete TITLE ☐ Change ☐ Addition NAME SAMUEL, KEITH W NAME STREET ADDRESS 1114 27TH ST EAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34208** MLE Delete TITLE □ Change ☐ Addition ARMSTEAD, BESSIE M NAME 2108 15TH STREET EAST STREET ADDRESS STREET ADDRESS **BRADENTON FL 34207** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Chanœ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI- AP THE ☐ Addition ☐ Defete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

indicated on this report or supplemental report is true and accurate and that my signature snall 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 attachnient with an address, with all other like empowered.

SIGNATURE: 

SIGNATURE: 

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information