

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000133229

**FILED**  
**Aug 04, 2006**  
**Secretary of State**

**Entity Name:** ARMSTRONG ARBOR TREE CARE, INC.

**Current Principal Place of Business:**

2920 NORTHWEST 44TH AVENUE  
LAUDERDALE LAKES, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

2920 NORTHWEST 44TH AVENUE  
LAUDERDALE LAKES, FL 33313

**New Mailing Address:**

**FEI Number:** 51-0524148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARMSTRONG, ALLAN  
2920 NORTHWEST 44TH AVENUE  
LAUDERDALE LAKES, FL 33313 US

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

ARMSTRONG, TAFOYA N  
2920 NORTHWEST 44TH AVENUE  
LAUDERDALE LAKES, FL 33313 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:** TAFOYA N. ARMSTRONG

08/04/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** ARMSTRONG, ALLAN  
**Address:** 2920 NORTHWEST 44TH AVENUE  
**City-St-Zip:** LAUDERDALE LAKES, FL 33313

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** VP ( ) Change (X) Addition  
**Name:** ARMSTRONG, TAFOYA N  
**Address:** 2920 NORTHWEST 44TH AVE  
**City-St-Zip:** LAUDERDALE LAKES, FL 33313

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:** ALLAN ARMSTRONG

P

08/04/2006

Electronic Signature of Signing Officer or Director

Date