
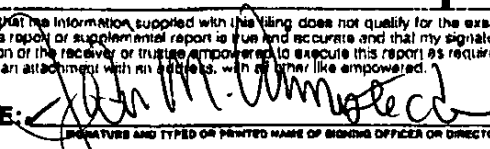


**FILED**  
**Sep 15, 2006 8:00 am**  
**Secretary of State**

09-15-2006 90001 019 \*\*\*150.00

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

<b>DOCUMENT # P05000103060</b>			
1. Entity Name <b>ARMISTEAD FAMILY, INC.</b>			
Principal Place of Business <b>5933 WHITE SANDS ROAD KEYSTONE HEIGHTS, FL 32656</b>		Mailing Address <b>5933 WHITE SANDS ROAD KEYSTONE HEIGHTS, FL 32656</b>	
2. Principal Place of Business		3. Mailing Address	
State, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
09122006		Chg-P CR2E034 (11/05)	
4. FEI Number <b>20-3188032</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$0.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>ARMISTEAD, NAOMI J 5933 WHITE SANDS ROAD KEYSTONE HEIGHTS, FL 32656</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature required for principal name of registered agent and state if applicable. (NOTE: Registered Agent's signature required when reappointing)</small>			
<b>FILE NOW!! FEB 18 \$150.00 Due by September 18, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ARMISTEAD, NAOMI J</b>	NAME	
STREET ADDRESS	<b>5933 WHITE SANDS RD.</b>	STREET ADDRESS	
CITY - ST - ZIP	<b>KEYSTONE HEIGHTS, FL 32656</b>	CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VO</b>	NAME	
STREET ADDRESS	<b>ARMISTEAD, JODI M</b>	STREET ADDRESS	
CITY - ST - ZIP	<b>5856 BRYCE ST. KEYSTONE HEIGHTS, FL 32656</b>	CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: <b>9/14/06</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

40104226



ATTACHMENT 40104226

**Electronic Articles of Incorporation  
For**

P05000103060  
FILED  
July 22, 2005  
Sec. Of State  
cbialook

ARMISTEAD FAMILY, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:  
ARMISTEAD FAMILY, INC.

**Article II**

The principal place of business address:  
5933 WHITE SANDS ROAD  
KEYSTONE HEIGHTS, FL. 32656

The mailing address of the corporation is:  
5933 WHITE SANDS ROAD  
KEYSTONE HEIGHTS, FL. 32656

**Article III**

The purpose for which this corporation is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The number of shares the corporation is authorized to issue is:  
100

**Article V**

The name and Florida street address of the registered agent is:  
NAOMI J ARMISTEAD  
5933 WHITE SANDS ROAD  
KEYSTONE HEIGHTS, FL. 32656

ATTACHMENT 40104226

I certify that I am familiar with and accept the responsibilities of registered agent.

P05000103080  
FILED  
July 22, 2005  
Sec. Of State  
cblalock

Registered Agent Signature: NAOMI J. ARMISTEAD

**Article VI**

The name and address of the incorporator is:

NAOMI J. ARMISTEAD  
5933 WHITE SANDS ROAD  
KEYSTONE HEIGHTS, FL 32656

Incorporator Signature: NAOMI J. ARMISTEAD

**Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
NAOMI J ARMISTEAD  
5933 WHITE SANDS RD.  
KEYSTONE HEIGHTS, FL. 32656

Title: VO  
JODI M ARMISTEAD  
5856 BRYCE ST.  
KEYSTONE HEIGHTS, FL. 32656

**Article VIII**

The effective date for this corporation shall be:

07/22/2005