

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000043912

Entity Name: ARM FINANCIAL GROUP, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

2451 MCMULLEN BOOTH RD STE 200
CLEARWATER, FL 33759

New Principal Place of Business:

15 HARBOR COVE STREET
SAFETY HARBOR, FL 34695

Current Mailing Address:

2451 MCMULLEN BOOTH RD STE 200
CLEARWATER, FL 33759

New Mailing Address:

PO BOX 206
SAFETY HARBOR, FL 34695

FEI Number: 55-0917234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANCARI, BRIAN M
2451 MCMULLEN BOOTH RD STE 200
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

STANCARI, BRIAN M
15 HARBOR COVE STREET
SAFETY HARBOR, FL 34695 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: BRIAN M STANCARI

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STANCARI, BRIAN M
Address: 2451 MCMULLEN BOOTH RD STE 200
City-St-Zip: CLEARWATER, FL 33759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STANCARI, BRIAN M
Address: 15 HARBOR COVE STREET
City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN M STANCARI

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date