

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2007 8:00 am
Secretary of State

01-30-2007 90013 045 ***150.00

DOCUMENT # P95000058394					
1. Entity Name ARMSTRONG & ASSOCIATES INDUSTRIAL COATINGS, INC.					
Principal Place of Business 23755 LAKEHILLS DRIVE LUTZ FL 33549			Mailing Address 23755 LAKEHILLS DRIVE LUTZ FL 33559		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3329314	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ARMSTRONG, RICHARD 23755 LAKEHILLS DRIVE LUTZ FL 33549				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL 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 _____ Signature, typed or printed name of registered agent and office - not applicable (NOTE: Registered Agent signature required when registered)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution ☐	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DP ARMSTRONG, RICHARD 23755 LAKEHILLS DRIVE LUTZ FL 33549	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 info empowered.					
SIGNATURE: <i>Richard Armstrong</i>				Date: 2-19-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					