

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
May 18, 2007  
Secretary of State**

DOCUMENT# F94000003155

Entity Name: AARM, INC.

**Current Principal Place of Business:**2160 LINCOLN HWY., EAST  
BOX 6  
LANCASTER, PA 176021150**New Principal Place of Business:****Current Mailing Address:**2160 LINCOLN HWY., EAST  
BOX 6  
LANCASTER, PA 176021150**New Mailing Address:**

FEI Number: 23-271962

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**MCGREADY, MARILYN A  
30695 SW 162 AVE  
HOMESTEAD, FL 33033 US**Name and Address of New Registered Agent:**CT CORP SYSTEMS  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MARGARET E. ROTZAHN

05/18/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: P ( ) Delete  
Name: LEAMAN, PHILIP B  
Address: 109 SKYLINE DRIVE  
City-St-Zip: NEW HOLLAND, PA 17557Title: S ( ) Delete  
Name: REID, KATHY  
Address: 1451 DUNDEE AVE  
City-St-Zip: ELGIN, IL 60120Title: D ( ) Delete  
Name: STUCKEY, KEITH  
Address: 2001 E OREGON ROAD  
City-St-Zip: LITITZ, PA 17543Title: T ( ) Delete  
Name: MILLER, LARRY  
Address: 2160 LINCOLN HIGHWAY EAST, PO 10455  
City-St-Zip: LANCASTER, PA 17605**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: T (X) Change ( ) Addition  
Name: KING, VERNON  
Address: 2990 CARLISLE PIKE  
City-St-Zip: NEW OXFORD, PA 17350

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP B. LEAMAN

P

05/18/2007

Electronic Signature of Signing Officer or Director

Date