

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006371

FILED
Jul 22, 2008
Secretary of State

Entity Name: INDEPENDENT TECHNOLOGIES, INC.

Current Principal Place of Business:

11640 ARBOR STREET
100
OMAHA, NE 68144

New Principal Place of Business:

Current Mailing Address:

11640 ARBOR STREET
100
OMAHA, NE 68144

New Mailing Address:

FEI Number: 47-0685933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, HANK
2835 N HWY A1A
INDIALANTIC, FL 32903 US

Name and Address of New Registered Agent:

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: _____

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 ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: INGALSBE, DARYL E
Address: 11640 ARBOR STREET #100
City-St-Zip: OMAHA, NE 68144

Title: VST () Delete
Name: O'DELL, TIMOTHY S
Address: 11640 ARBOR STREET #100
City-St-Zip: OMAHA, NE 68144

Title: VPD () Delete
Name: SMITH, HENRY L
Address: 2835 N HWY A1A
City-St-Zip: INDIALANTIC, FL 32903

Title: V () Delete
Name: INGALSBE, DAVID L
Address: 11640 ARBOR STREET #100
City-St-Zip: OMAHA, NE 68144

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

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: TIMOTHY S. O'DELL

_____ Electronic Signature of Signing Officer or Director

MR.

07/22/2008

_____ Date