

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90065 033 ***150.00

DOCUMENT # F9600002929
 1. Entity Name
 INTERGRAPH SERVICES COMPANY



60020742

Principal Place of Business: ALABAMA HUNTSVILLE, AL 35824 US
 Mailing Address: PO BOX 6724 HUNTSVILLE, AL 35824

2. Principal Place of Business - No P.O. Box #: Suite, Apt. #, etc.
 3. Mailing Address: Po Box 6724
 Suite, Apt. #, etc.



02162007 Chg-P CR2E034 (12/06)

City & State: Huntsville, AL
 Zip: 35813-0724 Country: US

4. FEI Number: 62-1478078
 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	JEFFREYS, DANNY C	
STREET ADDRESS	170 GRAPHIC DRIVE MAILSTOP IW1503	
CITY-ST-ZIP	MADISON, AL 35758	
TITLE	ST	<input type="checkbox"/> Delete
NAME	FROST, KEITH	
STREET ADDRESS	170 GRAPHICS DRIVE MAILSTOP IW1503	
CITY-ST-ZIP	MADISON, AL 35758	
TITLE	C	<input type="checkbox"/> Delete
NAME	SALTER, WILLIAM E	
STREET ADDRESS	170 GRAPHIC DRIVE MAILSTOP IW1503	
CITY-ST-ZIP	MADISON, AL 35758	
TITLE	D	<input type="checkbox"/> Delete
NAME	LASTER, LARRY	
STREET ADDRESS	170 GRAPHICS DRIVE MAILSTOP IW1503	
CITY-ST-ZIP	MADISON, AL 35758	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Reid French	
STREET ADDRESS	170 Graphic Drive	
CITY-ST-ZIP	MADISON, AL 35758	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: John French **2/24/07 2567301781**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #