

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J40085

**Entity Name:** INTEGRA ENTERPRISES CORPORATION**Current Principal Place of Business:**

% RE/MAX OF NEW ENGLAND, INC.  
8 STRATHMORE ROAD  
NATICK, MA 01760

**Current Mailing Address:**

% RE/MAX OF NEW ENGLAND, INC.  
8 STRATHMORE ROAD  
NATICK, MA 01760 US

**FEI Number:** 59-2768338**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SCHNEIDER, WALTER J.  
Address        8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

Title            CHAIRMAN OF THE BOARD  
Name            POLZLER, FRANK J.  
Address        8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

Title            TREASURER  
Name            SCHNEIDER, WALTER J.  
Address        8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

Title            SECRETARY  
Name            SOLOMON, JUDITH A.  
Address        8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

Title            COO AND MANAGING DIRECTOR  
Name            BARAK, EFRAIM  
Address        % RE/MAX OF NEW ENGLAND, INC.  
8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

Title            ASST. SECRETARY  
Name            SCHNEIDER, WALTER J.  
Address        % RE/MAX OF NEW ENGLAND, INC.  
8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

Title            VP, FINANCE  
Name            DOHERTY, DOLORES  
Address        % RE/MAX OF NEW ENGLAND, INC.  
8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

Title            DIRECTOR  
Name            POLZLER, FRANK J.  
Address        % RE/MAX OF NEW ENGLAND, INC.  
8 STRATHMORE ROAD  
City-State-Zip: NATICK MA 01760

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** JUDITH A. SOLOMON**SECRETARY****01/27/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	SCHNEIDER, WALTER J.
Address	% RE/MAX OF NEW ENGLAND, INC. 8 STRATHMORE ROAD
City-State-Zip:	NATICK MA 01760