

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J40085

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

C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
ASHLAND, MA 01721

Current Mailing Address:

C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
ASHLAND, MA 01721 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 C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

Title TREASURER
Name SCHNEIDER, WALTER J.
Address C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

Title ASST. SECRETARY
Name SCHNEIDER, WALTER J.
Address C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

Title DIRECTOR
Name POLZLER, FRANK J.
Address C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

Title CHAIRMAN OF THE BOARD
Name POLZLER, FRANK J.
Address C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

Title SECRETARY
Name SOLOMON, JUDITH A.
Address C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

Title CFO
Name DOHERTY, DOLORES
Address C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

Title DIRECTOR
Name SCHNEIDER, WALTER J.
Address C/O RE/MAX OF NEW ENGLAND, INC.
6 CIRRUS DRIVE SUITE 6110
City-State-Zip: ASHLAND MA 01721

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****02/06/2019**

Electronic Signature of Signing Officer/Director Detail

Date