

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065729

Entity Name: INTEGRATED PROJECT DELIVERY, INC.**Current Principal Place of Business:**1411 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805**Current Mailing Address:**1411 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805**FEI Number:** 59-3660820**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GLANCY, DAN
1411 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805 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:** DAN GLANCY

03/24/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR AND PRESIDENT
Name MARQUES, ALBERT
Address 1411 S ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32805

Title D
Name ROBERTS, JAMES D
Address 1411 S ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32805

Title TREASURER
Name GLANCY, DAN G
Address 1411 S ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32805

Title D
Name ANDREW, TODD M
Address 1411 S ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32805

Title D
Name ELSEA, JOHN W
Address 1411 S ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32805

Title DIRECTOR AND SECRETARY
Name TERRITO, JOSEPH L
Address 1411 S ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32805

Title D
Name CHATHAM, MIKE
Address 1411 S. ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32805

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: DANIEL GLANCY

TREASURER

03/24/2020

Electronic Signature of Signing Officer/Director Detail

Date