

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000053849

**Entity Name:** INTEGRATED FACILITY SYSTEMS, INC.

**Current Principal Place of Business:**

629 WEST BREVARD ST.  
TALLAHASSEE, FL 32304

**Current Mailing Address:**

629 WEST BREVARD ST.  
TALLAHASSEE, FL 32304

**FEI Number:** 59-3522598

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COOPER, CHARLES LJR  
3520 THOMASVILLE ROAD, SUITE 200  
TALLAHASSEE, FL 32309 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 PD  
Name KEARNEY, KELLY C  
Address 2810 WOODSIDE DR  
City-State-Zip: TALLAHASSEE FL 32312

Title VD  
Name KEARNEY, CHRISTOPHER W  
Address 2810 WOODSIDE DR  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name MATEO, JORGE  
Address 1611 MILTON ST  
City-State-Zip: TALLAHASSEE FL 32303

*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:** KELLY C KEARNEY

**PRESIDENT**

**01/11/2017**

Electronic Signature of Signing Officer/Director Detail

Date