

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 525415

FILED
Apr 29, 2009
Secretary of State

Entity Name: INDEPENDENT RESOURCES, INC.

Current Principal Place of Business:

5010 N NEBRASKA AVE, STE 200
BOX 23489 (ZIP 33623)
TAMPA, FL 33603

New Principal Place of Business:

5010 NORTH NEBRASKA AVENUE
TAMPA, FL 33603

Current Mailing Address:

5010 N NEBRASKA AVE, STE 200
BOX 23489 (ZIP 33623)
TAMPA, FL 33603

New Mailing Address:

P.O. BOX 23489
TAMPA, FL 33623

FEI Number: 59-1721810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATRICK W SKELTON
400 N ASHLEY DR
STE 2300
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CURBELO, D R SR
Address: 13512 AVISTA DRIVE
City-St-Zip: TAMPA, FL 33624

Title: V () Delete
Name: CURBELO, DEBORAH D.
Address: 3945 VENETIAN WAY
City-St-Zip: TAMPA, FL 33634

Title: P () Delete
Name: CURBELO, DAVID
Address: 3942 VEARSAILLES DR.
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DEBORAH D. CURBELO

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date