

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 644889

Entity Name: INTI, INC.

FILED
Mar 03, 2007
Secretary of State

Current Principal Place of Business:

535 SOUTH JACKSON
P.O. BOX 990
BARTOW, FL 33830

New Principal Place of Business:

535 SOUTH JACKSON
BARTOW, FL 33830

Current Mailing Address:

535 SOUTH JACKSON
P.O. BOX 990
BARTOW, FL 33830

New Mailing Address:

FEI Number: 59-1965197 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMULLEN, JANET BETH
535 SOUTH JACKSON AVENUE
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

MCMULLEN, WILLIAM G.
535 S JACKSON STREET
BARTOW, FL 33830 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: WILLIAM G MCMULLEN

03/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCMULLEN, WILLIAM GU, Y
Address: 8757 COUNTY LINE ROAD
City-St-Zip: DELANO, MN 55328

Title: STD (X) Delete
Name: MCMULLEN, JANET BETH,
Address: 535 S. JACKSON AVENUE
City-St-Zip: BARTOW, FL 33830

Title: D () Delete
Name: ORROCK, JANE
Address: 4424 MC FARLIN BLVD
City-St-Zip: DALLAS, TX 75205

Title: D () Delete
Name: WATKINS, JOAN
Address: 6505 CHEROKEE TRAIL
City-St-Zip: EDINA, MN 55439

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: ORROCK, JANE
Address: 4424 MC FARLIN BLVD
City-St-Zip: DALLAS, TX 75205

Title: SD (X) Change () Addition
Name: WATKINS, JOAN
Address: 6505 CHEROKEE TRAIL
City-St-Zip: EDINA, MN 55439

I hereby certify that the information supplied with this filing does not qualify for the 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: JANE M ORROCK

TD

03/03/2007

Electronic Signature of Signing Officer or Director

Date