

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005647

FILED
Jan 11, 2008
Secretary of State

Entity Name: FLORIDA INTEGRITY INTERIORS, INC.

Current Principal Place of Business:

3421 JAMES PHILLIPS DR. STE A
OKEMOS, MI 48864

New Principal Place of Business:

3421 JAMES PHILLIPS DR.
STE A
OKEMOS, MI 48864

Current Mailing Address:

3900 CENTENNIAL DR. STE B
MIDLAND, MI 48642

New Mailing Address:

3900 CENTENNIAL DR.
STE C
MIDLAND, MI 48642

FEI Number: 38-3531260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROFTS, MICHAEL L
172 W. WARREN AVE.
STE 210
LONGWOOD, FL 32750 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: P () Delete
Name: SCHARICH, RICK L
Address: 10535 RED OAK RIDGE
City-St-Zip: HOWARD CITY, MI 49329

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHARICH, RICK L
Address: 3421 JAMES PHILLIPS DR. STE. A.
City-St-Zip: OKEMOS, MI 48864

Title: T () Change (X) Addition
Name: PAPE, NICKOLAS L
Address: 3421 JAMES PHILLIPS DR. STE A.
City-St-Zip: OKEMOS, MI 48864

Title: VP () Change (X) Addition
Name: COOPER, ROBERT C
Address: 3421 JAMES PHILLIPS DR. STE A.
City-St-Zip: OKEMOS, MI 48864

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: RICK L. SCHARICH

P

01/11/2008

Electronic Signature of Signing Officer or Director

Date