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Jan 28, 1999 8:00am
Secretary of State

01-28-1999 90025 019 *****150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000003534

1. Corporation Name
INTEGRITY PRICE, INC.

Principal Place of Business
9000 HIGHWAY 44 EAST
MOUNT WASHINGTON KY 40047-7309

Mailing Address
9000 HIGHWAY 44 EAST
MOUNT WASHINGTON KY 40047-7309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/08/1997

4. FEI Number

61-1262437

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MONTGOMERY, CHRISTOPHER L
2603 OCEAN DRIVE
VERO BEACH FL 32963

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MONTGOMERY, CHRISTOPHER L
STREET ADDRESS 9000 HIGHWAY 44 EAST
CITY-ST-ZIP MOUNT WASHINGTON KY 40047-7309

1.1 TITLE

61-1262437

☐ Change ☐ Addition

TITLE V
NAME ALLEN, GARY W
STREET ADDRESS 9000 HIGHWAY 44 EAST
CITY-ST-ZIP MOUNT WASHINGTON KY 40047-7309

2.1 TITLE

☐ Change ☐ Addition

TITLE TS
NAME VANHAMBURG, ELLEN M
STREET ADDRESS 9000 HIGHWAY 44 EAST
CITY-ST-ZIP MOUNT WASHINGTON KY 40047-7309

3.1 TITLE

☐ Change ☐ Addition

TITLE C
NAME MONTGOMERY, RICHARD L
STREET ADDRESS 9000 HIGHWAY 44 EAST
CITY-ST-ZIP MOUNT WASHINGTON KY 40047-7309

4.1 TITLE

☐ Change ☐ Addition

TITLE D
NAME MONTGOMERY, C A
STREET ADDRESS 915 MEADER STREET
CITY-ST-ZIP CAMPBELLSVILLE KY 42718

5.1 TITLE

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHRISTOPHER L. MONTGOMERY 1/1/99 (502) 538-2104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)