

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K51953

FILED
Feb 24, 2009
Secretary of State

Entity Name: INNOVATIVE CONCEPT GROUP, INC.

Current Principal Place of Business:

INNOVATIVE CONCEPT GROUP, INC.
8508 BENJAMIN ROAD, SUITE C
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

INNOVATIVE CONCEPT GROUP, INC.
P O BOX 30719
TAMPA, FL 336303719 US

New Mailing Address:

INNOVATIVE CONCEPT GROUP, INC.
P O BOX 30719
TAMPA, FL 33630 US

FEI Number: 59-2920918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, WILLIAM S JR.
8508 BENJAMIN ROAD SUITE C
TAMPA, FL 33634 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: TAYLOR, WILLIAM S JR.
Address: P O BOX 30719
City-St-Zip: TAMPA, FL 336303719

Title: T () Delete
Name: PROVANCE, DARLENE
Address: P.O. BOX 30719
City-St-Zip: TAMPA, FL 336303719

Title: S () Delete
Name: GROSS, DEBORAH
Address: P.O. BOX 30719
City-St-Zip: TAMPA, FL 336303719

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TAYLOR, WILLIAM S JR.
Address: P O BOX 30719
City-St-Zip: TAMPA, FL 33630

Title: T (X) Change () Addition
Name: PROVANCE, DARLENE
Address: P.O. BOX 30719
City-St-Zip: TAMPA, FL 33630

Title: S (X) Change () Addition
Name: GROSS, DEBORAH
Address: P.O. BOX 30719
City-St-Zip: TAMPA, FL 33630

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: DARLENE PROVANCE

CFO

02/24/2009

Electronic Signature of Signing Officer or Director

Date