

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079726

FILED
Apr 13, 2009
Secretary of State

Entity Name: INTEGRITY HOMES, LLC

Current Principal Place of Business:

755 GRAND BLVD.
B105-188
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

755 GRAND BLVD.
B105-224
MIRAMAR BEACH, FL 32550 US

Current Mailing Address:

755 GRAND BLVD, B15-224
MIRAMAR BEACH, FL 32550

New Mailing Address:

FEI Number: 56-2530136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REID, TONI
220 HWY 393 N.
SANTA ROSA BEACH, FL 32459 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LIBERTY LEGAL RESEARCH, LLC
Address: 755 GRAND BLVD B105-173
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: MGRM () Delete
Name: WATERFORD INVESTMENTS, LLC
Address: 755 GRAND BLVD B105-224
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: MGRM () Delete
Name: NORTH AMERICAN INFORMATION TECHNOLOGY, LLC
Address: 1504 US HWY 395 N #8
City-St-Zip: GARDNERVILLE, NV 89410 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TONI REID

RA

04/13/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date