2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000017000

Address:

City-St-Zip:

Entity Name: INTEGRITY PROPERTIES OF TAMPA BAY, LLC

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2106 DREW STREET, SUITE 103 CLEARWATER, FL 33765 US				2106 DREW STREET SUITE 103 CLEARWATER, FL 33765 US		
Current Mailing Address:				New Mailing Address:		
2106 DREW STREET, SUITE 103 CLEARWATER, FL 33765 US				2106 DREW STREET SUITE 103 CLEARWATER, FL 33765 US		
FEI Number:	26-1991878	FEI Number Applied For ()	FEI Nun	nber Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US				OWENS, DEZRA 2106 DREW STREET SUITE 103 CLEARWATER, FL 33765 US		
	named entity su of Florida.	ubmits this statement for the p	urpose o	f changing i	its registered office or registered agent, or both,	
SIGNATURE: DEZRA OWENS					04/21/2009	
	Electronic	Signature of Registered Age	nt		Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () E OWENS, DEZRA 2106 DREW STR CLEARWATER, I	REET, SUITE 103		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	MGR () Change (X) Addition DRESDEN, GARY 2106 DREW STREET, SUITE 103 CLEARWATER, FL 33765	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	MGRM () Change (X) Addition DRESDEN, SCOTT 2106 DREW STREET, SUITE 103 CLEARWATER, FL 33765	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	MGRM () Change (X) Addition DRESDEN, BRYAN 2106 DREW STREET, SUITE 103 CLEARWATER, FL 33765	
Title: Name [:]	1 ()	Delete		Title:	MGRM () Change (X) Addition	

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.

Address:

City-St-Zip:

2106 DREW STREET, SUITE 103

CLEARWATER, FL 33765

SIGNATURE: DEZRA OWENS MGR 04/21/2009