

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M95910

FILED  
Jan 19, 2012  
Secretary of State

**Entity Name:** INTEGRITY AUTO SALES, INC.

**Current Principal Place of Business:**

5095 S. RIDGEWOOD AVENUE  
PORT ORANGE, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

5095 S. RIDGEWOOD AVENUE  
PORT ORANGE, FL 32127

**New Mailing Address:**

**FEI Number:** 59-2914610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COURY, JAMES S MR  
6084 SABAL HAMMOCK CIRCLE  
PORT ORANGE, FL 32128 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** COURY, JAMES S  
**Address:** 6084 SABAL HAMMOCK CIRCLE  
**City-St-Zip:** PORT ORANGE, FL 32128

**Title:** V  
**Name:** COURY, EYDIE  
**Address:** 51 POMPANO DR  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** T  
**Name:** MARSH, PALMA  
**Address:** 6043 HICKORY GROVE LANE  
**City-St-Zip:** PORT ORANGE, FL 32128

**Title:** S  
**Name:** MARSH, PALMA  
**Address:** 6043 HICKORY GROVE LANE  
**City-St-Zip:** PORT ORANGE, FL 32128

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES S COURY

P

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date