

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065729

FILED
Apr 26, 2007
Secretary of State

Entity Name: INTEGRATED PROJECT DELIVERY, INC.

Current Principal Place of Business:

1411 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

1411 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 59-3660820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERLIN, CYNTHIA C
1411 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805 US

Name and Address of New Registered Agent:

CONROY, CAROL A
1411 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805 US

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: CAROL A CONROY

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCEO () Delete
Name: MATTHEWS, OWEN STROUD
Address: 2034 COVE TRAIL
City-St-Zip: MAITLAND, FL 32751

Title: DVP () Delete
Name: ROBERTS, JAMES
Address: 1748 COLLEEN DRIVE
City-St-Zip: ORLANDO, FL 32809

Title: T () Delete
Name: CRAIN, SHANE L
Address: 14232 MAILER BLVD
City-St-Zip: ORLANDO, FL 32828

Title: S () Delete
Name: PETERLIN, CYNTHIA C
Address: 5514 SATEL DR
City-St-Zip: ORLANDO, FL 32810

Title: DP () Delete
Name: TERRITO, JOE
Address: 441 ENTERPRISE STREET
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CONROY, CAROL A
Address: 419 MINNEHAHA ROAD
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL A CONROY

SEC

04/26/2007

Electronic Signature of Signing Officer or Director

Date