

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000084422

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** INTEGRITY REAL ESTATE OF FLORIDA, INC.

**Current Principal Place of Business:**

3455 A S MCCALL  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

**Current Mailing Address:**

3455-A S MCCALL  
ENGLEWOOD, FL 34224

**New Mailing Address:**

**FEI Number:** 65-1041853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOBSON, GEORGE  
22495 BIANCHARD AVE  
PORT CHARLOTTE, FL 33952 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: VP ( ) Delete  
Name: OATHOUT, GLENDA  
Address: 2362 RISKEN TERR  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: VP ( ) Delete  
Name: DEILLY, DIANE L  
Address: 1075 NW WEBSTER  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: ST ( ) Delete  
Name: HOBSON, GENEVA  
Address: 22495 BLANCHARD AVE  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: P ( ) Delete  
Name: HOBSON, GEORGE L  
Address: 22495 BLANCHARD  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VP ( ) Delete  
Name: GEDEON, YVON  
Address: 17126 CALHOUN LANE  
City-St-Zip: PORT CHARLOTTE, FL 33948

**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: ( ) 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 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:** GEORGE L. HOBSON

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date