## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000095188

Entity Name: INTEGRITY MORTGAGE OF LAKELAND, INC.

FILED Jul 20, 2005 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business: 123 N KENTUCKY AVE 4415 FLORIDA NATIONAL DR. SUITE 202 SUITE 205 LAKELAND, FL 33813 LAKELAND, FL 33813 New Mailing Address: **Current Mailing Address:** 630 CHRISTINA LAKE DR 4415 FLORIDA NATIONAL DR. SUITE 205 LAKELAND, FL 33813 LAKELAND, FL 33813 FEI Number: 59-3639317 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: JENKINS, GREG HUGHES, KATHLEEN 630 CHRÍSTINA LAKE DR 101 WINDSOR LAKELAND, FL 33813 US LAKELAND, FL 33813 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: KATHLEEN HUGHES 07/20/2005 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition JENKINS, KATHLEEN HUGHES, KATHLEEN Name: Name: 603 CHRISTINA LAKE DR . 101 WINDSOR Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: ( ) Change (X) Addition JOHNSON, ESTRELLA Name: Name: 6936 LAKE EAGLEBROOKE DR Address: Address: LAKELAND, FL 33813 City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete KING, CYNTHIA Name: Name: 6936 LAKE EAGLEBROOKE DR. Address Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: D/VP ( ) Change (X) Addition HUGHES, TONY Name: Name: Address: Address: 101 WINDSOR City-St-Zip: City-St-Zip: LAKELAND, FL 33813

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KATHLEEN HUGHES PS 07/20/2005