

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000014198

FILED
Feb 01, 2008
Secretary of State

Entity Name: INTEGRITY INSURANCE OF FLORIDA, INC.

Current Principal Place of Business:

6150 STATE ROAD 70 EAST
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

6150 STATE ROAD 70 EAST
BRADENTON, FL 34203

New Mailing Address:

FEI Number: 65-1075741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARLENE, CONNELLY G
3813 GULF BLVD #509
ST PETE BEACH, FL 33706 US

Name and Address of New Registered Agent:

MARLENE, CONNELLY G
1505 PASS A GRILLE WAY #23
ST PETE BEACH, FL 33706 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: _____

Electronic Signature of Registered Agent

02/01/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: CONNELLY, MARLENE G
Address: 6150 STATE ROAD 70 EAST
City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARLENE CONNELLY

Electronic Signature of Signing Officer or Director

PSD

02/01/2008

Date