


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2006 8:00 am
Secretary of State

02-01-2006 90011 018 ***150.00

DOCUMENT # P03000085955

1. Entity Name
INTEGRITY INSURANCE & FINANCIAL PLANNING, INC.



Principal Place of Business
**2111 E MICHIGAN ST STE 103
 ORLANDO, FL 32806**

Mailing Address
**2111 E MICHIGAN ST STE 103
 ORLANDO, FL 32806**

DO NOT WRITE IN THIS SPACE



01032006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0138439	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HOUGH, RANDALL S
 2111 E MICHIGAN ST STE 103
 ORLANDO, FL 32806**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOUGH, RANDALL S 1314 APPLETON AVE ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOUGH, PAMELA A 1314 APPLETON AVE ORLANDO, FL 32806
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: *Randall S Hough* **1/30/06** **(407) 898-3300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #