## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000150058

Entity Name: INTEGRATED ACCESS CONTROL, INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3448 GREEN PINE ROAD 96372 GREEN PINE ROAD YULEE, FL 32097 US YULEE, FL 32097 US

Current Mailing Address: New Mailing Address:

3448 GREEN PINE ROAD YULEE, FL 32097 US 96372 GREEN PINE ROAD YULEE, FL 32097 US

FEI Number: 20-0466710 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BRAUDA, PAMELA T

3448 GREEN PINE ROAD
YULEE,, FL 32097 US

BRAUDA, PAMELA T
96372 GREEN PINE ROAD
YULEE,, FL 32097 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: PAMELA T. BRAUDA 04/30/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 BRAUDA, JOHN L
 Name:
 BRAUDA, JOHN L

 Address:
 3448 GREEN PINE ROAD
 Address:
 96372 GREEN PINE ROAD

 City-St-Zip:
 YULEE, FL 32097 US
 City-St-Zip:
 YULEE, FL 32097 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 BRAUDA, PAMELA T
 Name:
 BRAUDA, PAMELA T

 Address:
 3448 GREEN PINE ROAD
 Address:
 96372 GREEN PINE ROAD

 City-St-Zip:
 YULEE, FL 32097 US
 City-St-Zip:
 YULEE, FL 32097 US

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: PAMELA T. BRAUDA VP 04/30/2005