

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000027653

FILED
Jan 28, 2009
Secretary of State

Entity Name: INTEGRITY TOTAL CAR CARE, INC.

Current Principal Place of Business:

7 ENTERPRISE DRIVE
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

3063 PAINTERS WALK
FLAGLER BEACH, FL 32136

New Mailing Address:

FEI Number: 02-0734156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, JERRY C
4721 E. MOODY BLVD
BLDG #5 SUITES 505 & 506
BUNNELL, FL, FL 32110 US

Name and Address of New Registered Agent:

KNIGHT, JERRY C
4721 E. MOODY BLVD
BLDG #5 SUITES 505 & 506
BUNNELL, FL 32110 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:

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: WALKER, ROBERT O
Address: 3063 PAINTERS WALK
City-St-Zip: FLAGLER BEACH, FL 32136

Title: TD () Delete
Name: WALKER, ROBERT O
Address: 3063 PAINTERS WALK
City-St-Zip: FLAGLER BEACH, FL 32136

Title: PSD () Delete
Name: HARTNETT, PATRICK J
Address: 48 PITTMAN DR
City-St-Zip: PALM COAST, FL 32164

Title: SEC () Delete
Name: PATRICK, HARTNETT J
Address: 48 PITTMAN DR
City-St-Zip: PALM COAST, FL 32164

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:

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: ROBERT O. WALKER

CEO

01/28/2009

Electronic Signature of Signing Officer or Director

Date