

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000078073

FILED
Apr 24, 2009
Secretary of State

Entity Name: INTEGRATED FINANCIAL SOLUTIONS GROUP INC

Current Principal Place of Business:

109 WYNDHAM DR
WINTER HAVEN, FL 33884

New Principal Place of Business:

6039 CYPRESS GARDEN BLVD #226
WINTER HAVEN, FL 33884

Current Mailing Address:

PO BOX 814
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 26-0479928 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, JULIE A
109 WYNDHAM DR
WINTER HAVEN, FL 33884 US

Name and Address of New Registered Agent:

WILLIAMS, JULIE A
6039 CYPRESS GARDEN BLVD #226
WINTER HAVEN, FL 33884 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: _____

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: WILLIAMS, JULIE A
Address: 109 WYNDHAM DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP () Delete
Name: WILLIAMS, STEPHEN D
Address: 109 WYNDHAM DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: SE/T () Delete
Name: CLINE, CATHERINE
Address: 4965 CHELTENHAM PLACE
City-St-Zip: CUMMING, GA 30041

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:

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: STEPHEN WILLIAMS

VP

04/24/2009

Electronic Signature of Signing Officer or Director

Date