

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000084574

FILED
Apr 28, 2008
Secretary of State

Entity Name: INTEGRATED AMENITIES, INC.

Current Principal Place of Business:

2 PINELAKES PARKWAY
4
PALM COAST, FL 32137

New Principal Place of Business:

101 PALM HARBOR PARKWAY
PALM COAST, FL 32137

Current Mailing Address:

2 PINELAKES PARKWAY
4
PALM COAST, FL 32137

New Mailing Address:

101 PALM HARBOR PARKWAY
PALM COAST, FL 32137

FEI Number: 26-0679814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MISTIE, MARK
141 LONDON DRIVE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

ALEXANDERSON, JOHN
70 BROCKTON LANE
PALM COAST, FL 32137 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: JOHN ALEXANDERSON

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MISTIE, MARK
Address: 141 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: VP () Delete
Name: SPITZER, GARRETT
Address: 16 WASSERMAN DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: S () Delete
Name: ROTUNNO, KIMBERLY
Address: 24 UNIONDALE PLACE
City-St-Zip: PALM COAST, FL 32137

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MISTIE, MARK
Address: 141 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: D (X) Change () Addition
Name: SPITZER, GARRETT
Address: 16 WASSERMAN DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: ALEXANDERSON, JOHN
Address: 70 BROCKTON LANE
City-St-Zip: PALM COAST, FL 32137

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: KIMBERLY ROTUNNO

S

04/28/2008

Electronic Signature of Signing Officer or Director

Date