

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000071443

FILED
Oct 12, 2004
Secretary of State

Entity Name: INTEGRATED BUSINESS DEVELOPMENT, INC.

Current Principal Place of Business:

2416 CAPE CORAL PARKWAY W
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

2416 CAPE CORAL PARKWAY W
CAPE CORAL, FL 33914 US

New Mailing Address:

FEI Number: 65-0861442 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LANE, ROBERT L
Address: 1513 HONOR COURT
City-St-Zip: LEHIGH ACRES, FL 33971

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LANE, ROBERT L
Address: 2416 CAPE CORAL PARKWAY W
City-St-Zip: CAPE CORAL, FL 33914

Title: VP () Change (X) Addition
Name: LANE, PATRICIA
Address: 2416 CAPE CORAL PARKWAY W
City-St-Zip: CAPE CORAL, FL 33914

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: PATRICIA LANE

VP

10/12/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date