# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 29, 2007**
**Secretary of State**

DOCUMENT# P99000103393

**Entity Name:** INTEGRITY EMPLOYEE LEASING, INC.

**Current Principal Place of Business:**

3622 TAMIAMI TRL
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

3622 TAMIAMI TRL
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

**FEI Number: 59-3611544** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

NATOLI, THOMAS J
3622 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: NATOLI, THOMAS J
Address: 2145 HYATT DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: CEO ( ) Delete
Name: NATOLI, THOMAS J
Address: 2145 HYATT DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T ( ) Delete
Name: CAMPBELL, JOANNE
Address: 21239 DAVISON AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: S ( ) Delete
Name: GARCIA, KERRY
Address: 3740 GIBLIN DRIVE
City-St-Zip: NORTH PORT, FL 34286

Title: VPD ( ) Delete
Name: BOOKWALTER, BRENTNER
Address: 4994 RHAPSODY AVENUE
City-St-Zip: NORTH PORT, FL 34288

**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:

Title: VPD (X) Change ( ) Addition
Name: BOOKWALTER, BRENTNER
Address: 5659 SURPRISE ROAD
City-St-Zip: NORTH PORT, FL 34288

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS NATOLI PD 01/29/2007

Electronic Signature of Signing Officer or Director — Date