

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01410

FILED  
Feb 09, 2005  
Secretary of State

Entity Name: INSIGHT WITH INTEGRITY, INC.

## Current Principal Place of Business:

9856 SW VENTURA DR  
PALM CITY, FL 34990 US

## New Principal Place of Business:

## Current Mailing Address:

9856 SW VENTURA DR  
PALM CITY, FL 34990 US

## New Mailing Address:

FEI Number: 65-0303559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORMANDY, MICHAEL L.  
9856 SW VENTURA DIVE  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

NORMANDY, MICHAEL L  
9856 SW VENTURA DIVE  
PALM CITY, FL 34990 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: MICHAEL L NORMANDY

02/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NORMANDY, MICHAEL L.,  
Address: 9856 SW VENTURA DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: NORMANDY, MICHAEL,  
Address: 9856 SW VENTURA DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: NORMANDY, EVELYN,  
Address: 9856 SW VENTURA DRIVE  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: NORMANDY, MICHAEL L  
Address: 9856 SW VENTURA DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Change ( ) Addition  
Name: NORMANDY, MICHAEL  
Address: 9856 SW VENTURA DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Change ( ) Addition  
Name: NORMANDY, EVELYN  
Address: 9856 SW VENTURA DRIVE  
City-St-Zip: PALM CITY, FL 34990

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: MICHAEL L NORMANDY

PRES

02/09/2005

Electronic Signature of Signing Officer or Director

Date