

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000027158

**Entity Name:** FACILITY INTEGRATION SOLUTIONS, INC.

**Current Principal Place of Business:**

24088 SISLER AVE  
CHRISTMAS, FL 32709

**Current Mailing Address:**

P O BOX 1358  
CHRISTMAS, FL 32709 US

**FEI Number: 59-3567749**

**Certificate of Status Desired: Yes**

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

MCDERMOTT, JOHN MIII  
24088 SISLER AVENUE  
CHRISTMAS, FL 32709 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title V  
Name MCDERMOTT, JOHN MIII  
Address 24088 SISLER AVENUE  
City-State-Zip: CHRISTMAS FL 32709

Title D  
Name LENEVE, RICHARD  
Address 6746 DICKISON RD  
City-State-Zip: DUNLAP IL 61525

Title S  
Name SCHECK, ROGER  
Address 514 ANKLE LANE  
City-State-Zip: METAMORA IL 61548

Title T  
Name PENNOINGTON, JEFF  
Address 1309 WOODS FARM LANE  
City-State-Zip: SPRINGFIELD IL 62704

*I hereby 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 all other like empowered.*

**SIGNATURE: RICHARD LENEVE**

**PRES**

**08/15/2016**

Electronic Signature of Signing Officer/Director Detail

Date