

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000105868

1. Entity Name
IPSWICH, INC.



Principal Place of Business
721 FRON TST., SUITE 110
CELEBRATION, FL 34747

Mailing Address
721 FRON TST., SUITE 110
CELEBRATION, FL 34747



01162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3689519

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHOOLEY, JANET
721 FRONT STREET, SUITE 110
CELEBRATION, FL 34747

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, hand or printed name of registered agent, and date if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

000000613382
02/05/07-80036-009 150.00

TITLE PD
NAME WHOOLEY, JANET
STREET ADDRESS 721 FRONT STREET, #110
CITY-ST-ZIP CELEBRATION, FL 34747

TITLE SD
NAME WHOOLEY-BONA, SUSAN
STREET ADDRESS 721 FRONT STREET, #110
CITY-ST-ZIP CELEBRATION, FL 34747

TITLE TD
NAME WHOOLEY-SANTRY, LINDA
STREET ADDRESS 721 FRONT STREET, #110
CITY-ST-ZIP CELEBRATION, FL 34747

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janet Whooley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/07
Date

Daytime Phone #