## **FILED 2008 FOR PROFIT CORPORATION** Mar 26, 2008 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P00000105868 1. Entity Name IPSWICH, INC. Principal Place of Business Mailing Address 721 FRON TST., SUITE 110 721 FRON TST., SUITE 110 CELEBRATION, FL 34747 CELEBRATION, FL 34747 03092008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FE! Number 59-3689519 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHOOLEY, JANET 721 FRONT STREET, SUITE 110 DO NOT WRITE CELEBRATION, FL 34747 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 UUUUUU869697 OFFICERS AND DIRECTORS 10. 04/09/08-80061-007 150.00 TITLE WHOOLEY, JANET

\$5.00 May Be

Added to Fees

9. Election Campaign Financing

Trust Fund Contribution.

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

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: V

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-\$T-ZIP - TITLE NAME STREET ADDRESS CITY-ST-ZIP

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Applied For

Not Applicable