


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 04, 2008 8:00 am
Secretary of State

06-04-2008 90237 001 ***150.00
06-04-2008 90237 002 ****10.00

DOCUMENT # P99000086277			
1. Entity Name SHIPLEY ENTERPRISES, INC.			
Principal Place of Business 5545 HAVERHILL RD REAR LAKE WORTH, FL 33463		Mailing Address 5545 HAVERHILL RD. LAKE WORTH, FL 33463	
2. Principal Place of Business - No P.O. Box # SAME		3. Mailing Address	
Suite, Apt. #, etc. SAME		Suite, Apt. #, etc.	
City & State Lake Worth		City & State	
Zip 33463	Country USA	Zip 33463	Country USA



05192008 Chg-P CR2E034 (12/06)

4. FEI Number
65-0988546

Applied For
Not Applicable

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

7. Name and Address of New Registered Agent

SHIPLEY-GOLDSTEIN, PHYLLIS 5545 HAVERHILL RD. LAKE WORTH, FL 33463		Name N/A	
		Street Address (P.O. Box Number is Not Acceptable) SAME	
		City FL	
		Zip Code	

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 *Phyllis Goldstein* **5/27/08**
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
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHIPLEY-GOLDSTEIN, PHYLLIS 5545 HAVERHILL RD. LAKE WORTH, FL 33463 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GOLDSTEIN, PHYLLIS 5545 HAVERHILL RD. LAKE WORTH, FL 33463 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Shipley-Goldstein Phyllis</i> <i>5545 HAVERHILL RD (SAME)</i> <i>LAKE WORTH FL 33463</i> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Phyllis Shipley Goldstein* **5/27/08** **361-294-8311**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #