

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000086277

1. Entity Name
SHIPLEY ENTERPRISES, INC.



FILED

11 MAY -9 AM 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 #
5545 HAVERHILL RD
Suite, Apt. #, etc.

3. Mailing Address
5545 HAVERHILL RD
Suite, Apt. #, etc.

04292011 Chg-P CR2E034 (11/08)

City & State
Lake Worth FLA
Zip
33463
Country
USA

City & State
Lake Worth FLA
Zip
Country

4. FEI Number
65-0988546
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SHIPLEY-GOLDSTEIN, PHYLLIS
5545 HAVERHILL RD.
LAKE WORTH, FL 33463

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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

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, 2011 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
SHIPLEY-GOLDSTEIN, PHYLLIS
5545 HAVERHILL RD.
LAKE WORTH, FL 33463 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
GOLDSTEIN, PHYLLIS
5545 HAVERHILL RD.
LAKE WORTH, FL 33463 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
GOLDSTEIN, SHIPLEY
5545 HAVERHILL RD
LAKE WORTH, FL 33463 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
800206985468
05/02/11--01012--004 **160.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Phyllis Goldstein April 30, 2011 561-318-9498

Ch...