

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000061181

Entity Name: IPLACEMENT, INC.**Current Principal Place of Business:**1245 W FAIRBANKS AVE
SUITE 400
WINTER PARK, FL 32789**Current Mailing Address:**1245 W FAIRBANKS AVE
SUITE 400
WINTER PARK, FL 32789 US**FEI Number:** 59-3585816**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BYRNE, ROBERT J
1245 W FAIRBANKS AVE
SUITE 400
WINTER PARK, FL 32789 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:** ROBERT J BYRNE**02/19/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** DIRECTOR, PRESIDENT AND CHIEF
EXECUTIVE OFFICER**Name** NUXOL, DAVID E**Address** 554 WISHBONE LN**City-State-Zip:** LAKE MARY FL 32746**Title** CHAIRMAN OF BOARD OF
DIRECTORS, EXECUTIVE CHAIRMAN**Name** BYRNE, ROBERT J**Address** 2605 COCHISE TRAIL**City-State-Zip:** WINTER PARK FL 32789**Title** CORPORATE SECRETARY, CFO**Name** BYRNE, KATHERINE H**Address** 2605 COCHISE TRAIL**City-State-Zip:** WINTER PARK FL 32789**Title** CHIEF OPERATING OFFICER**Name** MILLER, JAYSON**Address** 2014 DEPAUW AVENUE**City-State-Zip:** ORLANDO FL 32804

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: KATHERINE H BYRNE**CFO****02/19/2022**

Electronic Signature of Signing Officer/Director Detail

Date