

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V02856

**Entity Name:** I.D.P., INC.

**Current Principal Place of Business:**

505 MAITLAND AVE.  
SUITE 1000  
MAITLAND, FL 32701

**Current Mailing Address:**

505 MAITLAND AVE.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701

**FEI Number:** 59-3126696

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WRIGHT, DONALD F  
505 MAITLAND AVE.,  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PT  
Name MACE, MARY ANN  
Address 285 GRANDE WAY  
UNIT 505  
City-State-Zip: NAPLES FL 34110

Title VPS  
Name MACE, C.T.  
Address 285 GRANDE WAY  
UNIT 505  
City-State-Zip: NAPLES FL 34110

*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:** MARY ANN MACE

PT

02/09/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date