

FILE NOW: FILING FEE IS \$61.25

FILED

**Mar 23 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 717157 (2)
1. Corporation Name
IMPERIAL POINT GARDENS CONDOMINIUM, INC.



Principal Place of Business 2250 NE 56TH PLACE FORT LAUDERDALE FL 33308	Mailing Address 2250 NE 56TH PLACE FORT LAUDERDALE FL 33308 US
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3. Date Incorporated or Qualified 09/15/1969	
4. FEI Number 59-1359998	Applied For <input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

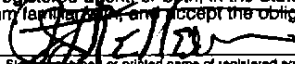
9. Name and Address of Current Registered Agent

ELSTON, LLOYD
2230 NE 56TH PL APT 207
FT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81. Name KETTERMAN, JAMES D.	
82. Street Address (P.O. Box Number is Not Acceptable) 5900 NE 22ND WAY APT 805	
83. City FT LAUDERDALE FL 33308	
84. City FL	85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  **JAMES D. KETTERMAN, PRESIDENT** **FEBRUARY 27, 1998**

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE PD	<input checked="" type="checkbox"/> DELETE
NAME CLARK, WILLIAMS D	
STREET ADDRESS 5700 N.E. 22ND WAY	
CITY-ST-ZIP FT LAUDERDALE, FL 00000	
TITLE SD	<input type="checkbox"/> DELETE
NAME KETTERMAN, JAMES	
STREET ADDRESS 5900 N.E. 22 WAY, APT. 805	
CITY-ST-ZIP FT. LAUDERDALE FL	
TITLE TD	<input type="checkbox"/> DELETE
NAME REILLY, ELEANOR	
STREET ADDRESS 5840 N.E. 22ND WAY	
CITY-ST-ZIP FT LAUDERDALE, FL 00000	
TITLE VD	<input type="checkbox"/> DELETE
NAME BUCHO, CARLOS	
STREET ADDRESS 5840 NE 22 WAY	
CITY-ST-ZIP FT. LAUDERDALE FL	
TITLE D	<input type="checkbox"/> DELETE
NAME DOYLE, ALLEN	
STREET ADDRESS 5720 NE 22 WAY, APT 427	
CITY-ST-ZIP FT. LAUDERDALE FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME SUBLETTE, EARLINE	
STREET ADDRESS 5900 NE 22 WAY, APT 828	
CITY-ST-ZIP FT LAUDERDALE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME KETTERMAN, JAMES D	
1.3 STREET ADDRESS 5900 NE 22ND WAY APT 805	
1.4 CITY-ST-ZIP FT LAUDERDALE FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME FABIANO, JEANNE	
2.3 STREET ADDRESS 2230 NE 56TH PLACE APT 207	
2.4 CITY-ST-ZIP FT LAUDERDALE FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME LOZITO, TARA	
3.3 STREET ADDRESS 5900 NE 22ND WAY APT 828	
3.4 CITY-ST-ZIP FT LAUDERDALE FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME DOYLE, ALLEN	
4.3 STREET ADDRESS 5720 NE 22ND WAY APT 427	
4.4 CITY-ST-ZIP FT LAUDERDALE FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME BUCHO, CARLOS	
5.3 STREET ADDRESS 5840 NE 22ND WAY APT 728	
5.4 CITY-ST-ZIP FT LAUDERDALE FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME REILLY, ELEANOR	
6.3 STREET ADDRESS 5840 NE 22ND WAY APT 708	
6.4 CITY-ST-ZIP FT LAUDERDALE FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:  **JAMES D. KETTERMAN PRES** **954/493-9461**

CR2E037 (10/97)