

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90043 006 ****61.25

DOCUMENT # 717157

1. Entity Name

IMPERIAL POINT GARDENS CONDOMINIUM, INC.

Principal Place of Business

2250 NE 56TH PLACE
 FT LAUDERDALE FL 33308

Mailing Address

2250 NE 56TH PLACE
 FT LAUDERDALE FL 33308
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1359998**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FABIANO, JEANNE DM
2230 N.E. 56TH PLACE #207
FT LAUDERDALE FL 33308

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.

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 \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME **FOSTER, JOANNE** ☐ Delete
 STREET ADDRESS **5820 NE 22ND WAY #628**
 CITY-ST-ZIP **FT LAUDERDALE FL 33308**

TITLE
 NAME **SECRETARY** ☒ Change ☐ Addition
 STREET ADDRESS **EARLINE SUBLETTE**
 CITY-ST-ZIP **5900 NE 22ND WAY #825**
FT LAUDERDALE, FL 33308

TITLE
 NAME **DOYLE, ALLEN** ☐ Delete
 STREET ADDRESS **5720 NE 22ND WAY #427**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33308**

TITLE
 NAME **TREASURER** ☒ Change ☒ Addition
 STREET ADDRESS **CHARLES SHERWOOD**
 CITY-ST-ZIP **5840 N.E. 22ND WAY #101**
FT LAUDERDALE, FL 33308

TITLE
 NAME **FABIANO, JEANNE** ☐ Delete
 STREET ADDRESS **2230 NE 56TH PLACE #207**
 CITY-ST-ZIP **FT LAUDERDALE FL 33308**

TITLE
 NAME **DANIEL KENT** ☐ Change ☒ Addition
 STREET ADDRESS **5800 NE 22ND WAY #508**
 CITY-ST-ZIP **FT LAUDERDALE, FL 33308**

TITLE
 NAME **GOULD, STEVEN** ☒ Delete
 STREET ADDRESS **5700 N.E. 22ND WAY #301**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE
 NAME **BARBARA COLLIER** ☐ Change ☒ Addition
 STREET ADDRESS **5441 N.E. 22ND AVE**
 CITY-ST-ZIP **FT LAUDERDALE, FL 33308**

TITLE
 NAME **STHAIR, FREDA** ☒ Delete
 STREET ADDRESS **2210 NE 56TH PL #122**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33308**

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

TITLE
 NAME **CLARK, WILLIAM** ☒ Delete
 STREET ADDRESS **5700 NE 22ND WAY #324**
 CITY-ST-ZIP **FT LAUDERDALE FL 33308**

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

12. 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 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 617, 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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEANNE FABIANO

Date

Daytime Phone #

12-9-02
954-76-0780

CR2E037 (9/01)