

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Apr 06 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 720825 (9)**  
 1. Corporation Name  
**IMPERIAL POINT PROPERTY OWNERS ASSOCIATION, INC.**



Principal Place of Business <b>14950 SOVEREIGN DR LARGO FL 34844</b>	Mailing Address <b>14950 SOVEREIGN DR LARGO FL 34644</b>
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3. Date Incorporated or Qualified <b>04/29/1971</b>		
4. FEI Number <b>59-1954021</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> 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 Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent  
**KOHL, CARL A  
 14969 CROWN DR  
 LARGO FL 33774**

10. Name and Address of New Registered Agent

81 Name <b>Courter, Jennie L</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>14462 Crown Drive</b>	
83	
84 City <b>Largo</b>	85 Zip Code <b>FL 33774</b>

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 *Jennie L. Courter* *Jennie L. Courter* DATE **3/27/98**

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

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	KOHL, CARL A	
STREET ADDRESS	14969 CROWN DR	
CITY-ST-ZIP	LARGO FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	COURTER, JENNIE L	
STREET ADDRESS	14462 CROWN DR.	
CITY-ST-ZIP	LARGO FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ZEIPFEL, VIOLET	
STREET ADDRESS	10443 MAGESTIC DR.	
CITY-ST-ZIP	LARGO FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	JAMES, WILLIAM G	
STREET ADDRESS	14393 YACHT CLUB BLVD.	
CITY-ST-ZIP	SEMINOLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BOBSYSHELL, RODNEY	
STREET ADDRESS	10216 REGAL DR., #406	
CITY-ST-ZIP	LARGO FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WASSON, KENNETH R	
STREET ADDRESS	14383 NEPTUNE RD.	
CITY-ST-ZIP	SEMINOLE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Gibbons, Jr., James M.	
1.3 STREET ADDRESS	15001 Sovereign Dr.	
1.4 CITY-ST-ZIP	Largo, FL 33774	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Courter, Jennie L.	
2.3 STREET ADDRESS	14462 Crown Dr.	
2.4 CITY-ST-ZIP	Largo, FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Render, Annabell R.	
6.3 STREET ADDRESS	14930 Crown Dr.	
6.4 CITY-ST-ZIP	SEMINOLE FL 33774	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: *Jennie L. Courter* DATE **3/27/98**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CPE037 (10/97)

Imperial Point Property Owners Association, Inc.

Additional Director:

Moore, Dwight D.  
14220 Passage Way  
Seminole, FL 33776