

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90134 044 ****61.25

DOCUMENT # 742169

1. Entity Name

IMPERIAL COVE CONDOMINIUM XIII ASSOCIATION, INC.

Principal Place of Business

19029 US HIGHWAY 19 NORTH
CLUBHOUSE OFFICE
CLEARWATER FL 34624

Mailing Address

19029 US HIGHWAY 19 NORTH
CLUBHOUSE OFFICE
CLEARWATER FL 34624

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

33764

Country

Zip

33764

Country

4. FEI Number

59-1843081

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~SHAW, MARLENE G.~~
19029 US HWY 19 NORTH
CLUBHOUSE OFFICE
CLEARWATER FL 34624

7. Name and Address of New Registered Agent

Name Condominium Associates

Street Address (P.O. Box Number is Not Acceptable)
19029 US HWY 19 N.

City Clearwater

FL

Zip Code

33764

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

TITLE TD ☒ Delete
NAME MORRILL, BUD
STREET ADDRESS 19029 US 19N #32-B
CITY-ST-ZIP CLEARWATER FL 33764

TITLE PD ☐ Delete
NAME MONAHAN, MARY
STREET ADDRESS 19029 US 19 N 31E
CITY-ST-ZIP CLEARWATER FL

TITLE VD ☐ Delete
NAME MCIAELSAN, ED
STREET ADDRESS 19029 US 19 NORTH 33A
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ Delete
NAME UNER, JANE
STREET ADDRESS 19029 US 19 NORTH 32E
CITY-ST-ZIP CLEARWATER FL

TITLE SD ☒ Delete
NAME ANGELO, JANE
STREET ADDRESS 19029 US 19N # 27-C
CITY-ST-ZIP CLEARWATER FL 33764

TITLE D ☐ Delete
NAME ERICKSON, EVERETT
STREET ADDRESS 19029 US HWY 19 N 27-B
CITY-ST-ZIP CLEARWATER FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD ☐ Change ☒ Addition
NAME Fred Hochrein
STREET ADDRESS 19029 US 19N # 32E
CITY-ST-ZIP Clearwater FL 33764

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

TITLE --- ☒ Change ☐ Addition
NAME ED MICHELSON
STREET ADDRESS ---
CITY-ST-ZIP ---

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

TITLE SD ☐ Change ☒ Addition
NAME Maureen Littlewood
STREET ADDRESS 19029 US 19 N # 35F
CITY-ST-ZIP Clearwater FL 33764

TITLE D ☐ Change ☒ Addition
NAME Jean Cundiff
STREET ADDRESS 19029 US 19N # 28B
CITY-ST-ZIP Clearwater FL 33764

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:

Mary Monahan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/01
Date

Daytime Phone #

CR2E037 (10/00)