


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90092 021 ****61.25

DOCUMENT # N02000008307					
1. Entity Name THE IMPERIAL CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 10000 EAST BAY HARBOR TERR BAY HARBOR ISLANDS FL 33154			Mailing Address % TMS P.O. BOX 822431 PEMBROKE PINES FL 33082		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 42-1558100	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DURIS, NICK # 401 1140 101 STREET BAY HARBOR ISLANDS FL FL 33154			7. Name and Address of New Registered Agent Name: DURIS, NICK Street Address (P.O. Box Number is Not Acceptable): 1140 101 STREET #401 City: BAY HARBOR ISLANDS, FL Zip Code: 33154		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>Nick</i>		(NOTE: Registered Agent signature required when reinstating)		DATE	
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYES, ELENA H		NAME		
STREET ADDRESS	10000 BAY HARBOUR TER., UNIT 504-A		STREET ADDRESS		
CITY- ST- ZIP	BAY HARBOR ISLAND FL 33154		CITY- ST- ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYES, ELENA		NAME		
STREET ADDRESS	10000 EAST BAY HARBOR TER, #504A		STREET ADDRESS		
CITY- ST- ZIP	BAY HARBOR ISLAND FL 33154		CITY- ST- ZIP		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DURIS, NICK		NAME	DURIS, NICK	
STREET ADDRESS	1140 101 ST., UNIT 302		STREET ADDRESS	1140 101 STREET #401	
CITY- ST- ZIP	BAY HARBOR ISLAND FL 33154		CITY- ST- ZIP	BAY HARBOR ISLANDS, FL 33154	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CURLESS, DIANE		NAME		
STREET ADDRESS	1140 101 STREET, 601		STREET ADDRESS		
CITY- ST- ZIP	BAY HARBOR FL 33154		CITY- ST- ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BHAMINI, FERRIS		NAME	BHAMINI, FERRIS	
STREET ADDRESS	10000 EAST BAY HARBOR TER		STREET ADDRESS	10000 BAY HARBOR Terrace #304	
CITY- ST- ZIP	BAY HARBOR FL 33154		CITY- ST- ZIP	BAY HARBOR ISLANDS, FL 33154	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMMOND, PATRICIA		NAME	HAMMOND, PATRICIA	
STREET ADDRESS	1140 101 STREET		STREET ADDRESS	1140 101 STREET #301	
CITY- ST- ZIP	BAY HARBOR FL 33154		CITY- ST- ZIP	BAY HARBOR ISLANDS, FL 33154	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Nick Duris</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 4/27/07	
				Daytime Phone #	