

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 731532

**Entity Name:** IMPERIAL EMBASSY CONDOMINIUM ONE, INC.

**Current Principal Place of Business:**

5837 TROUBLE CREEK ROAD  
NEW PORT RICHEY, FL 34652

**Current Mailing Address:**

5837 TROUBLE CREEK ROAD  
NEW PORT RICHEY, FL 34652 US

**FEI Number:** 59-1724611

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COMMUNITY MANAGEMENT SERVICES, INC  
5837 TROUBLE CREEK ROAD  
NEW PORT RICHEY, FL 34652 US

*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:** KIM JOHNSON

04/28/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, TREASURER  
Name WOODS, SANDRA  
Address 5837 TROUBLE CREEK ROAD  
City-State-Zip: NEW PORT RICHEY FL 34652

Title PRESIDENT  
Name FARQUHAR, BELLA  
Address 5837 TROUBLE CREEK ROAD  
City-State-Zip: NEW PORT RICHEY FL 34652

Title VP  
Name WOOD, BARBARA  
Address 5837 TROUBLE CREEK ROAD  
City-State-Zip: NEW PORT RICHEY FL 34652

Title D  
Name TRINCHILLO, DANIEL  
Address 5837 TROUBLE CREEK ROAD  
City-State-Zip: NEW PORT RICHEY FL 34652

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** SANDRA WOODS

**SECRETARY**

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date