

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734524

Entity Name: IMPERIALAKES COMMUNITY SERVICES ASSOCIATION I, INC.

Current Principal Place of Business:

4217 STONEHENGE RD.
MULBERRY, FL 33860

Current Mailing Address:

4217 STONEHENGE RD.
MULBERRY, FL 33860

FEI Number: 59-1902131

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAUFMAN, KARL E
4217 STONEHENGE RD
MULBERRY, FL 33860 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD
Name KAUFMAN, KARL E
Address 4217 STONEHENGE RD
City-State-Zip: MULBERRY FL 33860

Title TD
Name KATES, ELMER G.
Address 3039 BLOWN FEATHER LN.
City-State-Zip: MULBERRY FL 33860

Title VPD
Name FOSTER, RICHARD E. II
Address 4002 STONEHENGE RD.
City-State-Zip: MULBERRY FL 33860

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: KARL E KAUFMAN

PD

04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date