

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 734524

**FILED**  
**Apr 15, 2013**  
**Secretary of State**  
**CC1660576902**

**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: Yes**

**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	Title	TD
Name	KAUFMAN, KARL E	Name	BROWN, RONALD
Address	4217 STONEHENGE RD	Address	3008 WOODSONG COURT
City-State-Zip:	MULBERRY FL 33860	City-State-Zip:	MULBERRY FL 33860
Title	VPD		
Name	BROWN, RONALD		
Address	3008 WOODSONG COURT		
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**

**PRESIDENT**

**04/15/2013**

Electronic Signature of Signing Officer/Director Detail

Date