

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734524

Entity Name: IMPERIALAKES COMMUNITY SERVICES ASSOCIATION I, INC.

FILED
Apr 25, 2017
Secretary of State
CC8371543344

Current Principal Place of Business:

IMPERIALAKES COMMUNITY SERVICE ASSOCIATION PHASE 1, INC.
PO BOX 5983
LAKELAND, FL 33807-5983

Current Mailing Address:

IMPERIALAKES COMMUNITY SERVICE ASSOCIATION PHASE 1, INC.
PO BOX 5983
LAKELAND, FL 33807-5983 US

FEI Number: 59-1902131

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WOODS, DAVID M
3332 HEATHER GLYNN DRIVE
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: DAVID M. WOODS

04/25/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HUGHES, TOM
Address 3265 CROSS FOX DRIVE
City-State-Zip: MULBERRY FL 33860

Title TREASURER
Name HOFFMAN, MICHAEL .
Address 5024 ROCK GLEN TURN
City-State-Zip: MULBERRY FL 33860

Title VP
Name WOODS, DAVID
Address 3332 HEATHER GLYNN DR
City-State-Zip: MULBERRY FL 33860

Title SECRETARY
Name LINDEMANN, DIANE
Address 4030 OLD COLONY 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: DAVID M. WOODS

VP

04/25/2017

Electronic Signature of Signing Officer/Director Detail

Date