

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742169

Entity Name: IMPERIAL COVE CONDOMINIUM XIII ASSOCIATION, INC.**Current Principal Place of Business:**19029 US HWY 19 NORTH
CLUBHOUSE
CLEARWATER, FL 33764**Current Mailing Address:**19029 US HWY 19 NORTH
CLUBHOUSE
CLEARWATER, FL 33764 US**FEI Number: 59-1843081****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PARKER, RABIN P.A.
28095 US HWY 19 N STE 301
CLEARWATER, FL 33761 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 PRESIDENT
Name LAMOUREUX, CHERYL
Address 19029 US HWY 19 N 30-B
City-State-Zip: CLEARWATER FL 33764Title VP
Name GILLILAND, ED
Address 19029 US HWY 19 N 32-C
City-State-Zip: CLEARWATER FL 33764Title DIRECTOR
Name THOMPSON, JUDY
Address 19029 US HWY 19 N 31B
City-State-Zip: CLEARWATER FL 33764Title SECRETARY
Name REILLY, KEVIN
Address 19029 US HWY 19 N 28-A
City-State-Zip: CLEARWATER FL 33764Title TREASURER
Name HOCHREIN, FRED
Address 19029 US HWY 19 N 32-D
City-State-Zip: CLEARWATER FL 33764

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: CHERYL LAMOUREUX**PRESIDENT****03/30/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date