

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746364

Entity Name: IMPERIAL VILLAGE CONDOMINIUM ASSOCIATION OF BROWARD COUNTY, INC.

FILED
Apr 30, 2020
Secretary of State
3228521787CC

Current Principal Place of Business:

6200 NE 22 WAY
FT LAUDERDALE, FL 33308

Current Mailing Address:

C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
LAUDERHILL, FL 33319 US

FEI Number: 59-1977099

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
LAUDERHILL, FL 33319 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: NARESH RAY BACHAN MGR

04/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name PEKIC, DARIA
Address C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
City-State-Zip: LAUDERHILL FL 33319

Title VPD
Name THOLL, KRISTEN
Address C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
City-State-Zip: LAUDERHILL FL 33319

Title SECRETARY
Name MOSS, JAMES
Address C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
City-State-Zip: LAUDERHILL FL 33319

Title TREASURER
Name PACOVSKY, STANLEY
Address C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
City-State-Zip: LAUDERHILL FL 33319

Title D
Name KATZ, HARRIET
Address C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
City-State-Zip: LAUDERHILL FL 33319

Title D
Name TAYLOR, ROBERT
Address C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
City-State-Zip: LAUDERHILL FL 33319

Title DIRECTOR
Name DILKS, DIANE
Address C/O PREMIER ASSOCIATION MANAGEMENT
4502 INVERRARY BLVD
City-State-Zip: LAUDERHILL FL 33319

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: DARIA PEKIC

PRES

04/30/2020

Electronic Signature of Signing Officer/Director Detail

Date