

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000001461

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC0862861181**

**Entity Name:** VILLAGE OF IMAGINE CONDOMINIUM ONE ASSOCIATION, INC.

**Current Principal Place of Business:**

9501 UNIVERSAL BLVD.  
ORLANDO, FL 32819

**Current Mailing Address:**

9501 UNIVERSAL BLVD.  
ORLANDO, FL 32819

**FEI Number: 26-2078030**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BUTLER, GLENDA F  
9501 UNIVERSAL BLVD.  
ORLANDO, FL 32819 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: GLENDA F BUTLER**

**03/20/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name MAGNELLI, MICHAEL  
Address 9501 UNIVERSAL BLVD.  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR, VP  
Name BILLINGTON, JOHN  
Address 9501 UNIVERSAL BLVD.  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR, SECRETARY,  
TREASURER  
Name RODRIGUEZ, JENNIFER  
Address 9501 UNIVERSAL BLVD.  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name PLOSS, SEBASTIAN  
Address 9501 UNIVERSAL BLVD.  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR  
Name PELLETIER, RICK  
Address 9501 UNIVERSAL BLVD.  
City-State-Zip: ORLANDO FL 32819

*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: JENNIFER RODRIGUEZ**

**SECRETARY/TREASURER 03/20/2014**

Electronic Signature of Signing Officer/Director Detail

Date