



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90108 036 ****61.25

DOCUMENT # 714896 1. Entity Name IMPERIAL COURT CONDOMINIUM APARTMENTS V ASSOCIATION, INC.																																																																																																																							
Principal Place of Business 1433 S. BELCHER ROAD LARGO, FL 33771 US			Mailing Address C/O HOLIDAY ISLES PROPERTY MNGT., INC 7850 ULMERTON RD., SUITE #1 LARGO, FL 33771																																																																																																																				
2. Principal Place of Business <i>C/O Holiday Isles</i> Suite, Apt. #, etc. <i>7850 Ulmerton Rd. Ste 1</i>		3. Mailing Address Suite, Apt. #, etc.																																																																																																																					
City & State <i>Largo, Fl</i>		City & State		4. FEI Number 59-1385595																																																																																																																			
Zip <i>33771</i>		Country <i>US</i>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																			
6. Name and Address of Current Registered Agent HOLIDAY ISLES PROPERTY MGMT., INC. 7850 ULMERTON ROAD, SUITE #1 LARGO, FL 34641				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																			
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																							
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																			
Make check payable to Florida Department of State																																																																																																																							
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 677, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																							
SIGNATURE: <i>X Ken Schmidt</i> <i>4/19/04</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> <i>Ken Schmidt, President</i>																																																																																																																							