

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90205 050 ****61.25

DOCUMENT #717597 1. Entity Name IMPERIAL COVE CONDOMINIUM III ASSOCIATION, INC.					
Principal Place of Business 19029 U.S. HIGHWAY 19 NORTH CLUBHOUSE OFFICE CLEARWATER, FL 33764			Mailing Address 19029 U.S. HIGHWAY 19 NORTH CLUBHOUSE OFFICE CLEARWATER, FL 33764		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-1382175			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CARLUCCI, CLARA 19029 US HWY 19N CLUBHOUSE OFFICE CLEARWATER, FL 33764			7. Name and Address of New Registered Agent Name <i>Florida Community Property Management</i> Street Address (P.O. Box Number is Not Acceptable) <i>8141-54 Ave No</i> City <i>Petersburg</i> FL Zip Code <i>33709</i>		
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 <i>Clara Carucci Jr Florida Community Property Management</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD HOWELL, LORRAINE <input checked="" type="checkbox"/> Delete 19029 US HWY 19 N 8-17 CLEARWATER, FL 33764		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DAVIS, JOHN <input type="checkbox"/> Delete 19029 US 19 NORTH, 3-9 CLEARWATER, FL 33764		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD KRANT, RICHARD <input checked="" type="checkbox"/> Delete 19029 US HWY NORTH # 3-11 CLEARWATER, FL 33764		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <i>George Hartwell</i> <input type="checkbox"/> Delete <i>19029-US Hwy 19 N 3-8</i> <i>CLEARWATER FL 33764</i>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <i>Vincent McCarty</i> <input type="checkbox"/> Delete <i>19029-US Hwy 19 N 3-7</i> <i>CLEARWATER FL 33764</i>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with any other like empowered.					
SIGNATURE: <i>John T. Davis</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <i>3-29-06</i> Daytime Phone # <i>727-530-1255</i>		