


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90070 036 ****61.25

DOCUMENT # 719817 1. Entity Name IMPERIAL SOUTHGATE VILLAS CONDOMINIUM ASSOCIATION, SECTION I					
Principal Place of Business IMPERIAL SOUTHGATE VILLAS P.O. BOX 6444 LAKELAND FL 33807-6444		Mailing Address IMPERIAL SOUTHGATE VILLAS P.O. BOX 6444 LAKELAND FL 33807-6444			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1445545	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WESTBERG, ROY M 114 IMPERIAL SOUTHGATE LAELAND FL 33803-4681		7. Name and Address of New Registered Agent Name Same Street Address (P.O. Box Number is Not Acceptable) 740 Barber Circle Lakeland City FL Zip Code 33803-2322			
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		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	PD NEIDINGER, RUTH 115 IMPERIAL SOUTHGATE LAKELAND FL 33803 <input type="checkbox"/> Delete 736	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 736 Barber Circle Same		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EDSCORN, HELEN 107 IMPERIAL SOUTHGATE LAKELAND FL 33803 <input checked="" type="checkbox"/> Delete 717 Judy	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Judy Gates 713 Barber Circle same		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARTOE, ALMA 722 BARBER CIRCLE LAKELAND FL 33803 <input type="checkbox"/> Delete 711	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEXTON, SUZANNE 704 BARBER CIRCLE LAKELAND FL 33803 <input type="checkbox"/> Delete VPD	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition same		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, JOHN 131 IMPERIAL SOUTHGATE LAKELAND FL 33803 <input type="checkbox"/> Delete 711	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 731 Barber Circle same		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PETERS, JOAN 103 IMPERIAL SOUTHGATE LAKELAND FL 33803 <input checked="" type="checkbox"/> Delete Noe 711	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Alice Noe 711 Barber Circle same		
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 617, 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: Roy M. Westberg Roy M. Westberg 1130105 863-644-0669 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					