2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719817

FILED Feb 03, 2009 Secretary of State

Entity Name: IMPERIAL SOUTHGATE VILLAS CONDOMINIUM ASSOCIATION, SECTION I

Current Principal Place of Business: New Principal Place of Business:

IMPERIAL SOUTHGATE VILLAS IMPERIAL SOUTHGATE VILLAS

P.O. BOX 6444 601 IMPERIAL BLVD.

LAKELAND, FL 338076444 LAKELAND, FL 33803

Current Mailing Address: New Mailing Address:

IMPERIAL SOUTHGATE VILLAS P.O. BOX 6444 LAKELAND, FL 338076444

FEI Number: 59-1445545 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WESTBERG, ROY M 740 BARBER CIRCLE LAKELAND, FL 338032322 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

NEIDINGER, RUTH NEIDINGER, RUTH A Name: Name: 736 BARBER CIRCLE Address: 736 BARBER CIRCLE Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: LAKELAND, FL 33803 US

(X) Change () Addition Title: SD () Delete Title: SD

EDSCORN, HELEN Name: EDSCORN, HELEN Name: Address: 760 BARBER CIRCLE Address: 760 BARBER CIRCLE City-St-Zip: LAKELAND, FL 33803 City-St-Zip: LAKELAND, FL 33803 US

Title: () Delete Title: (X) Change () Addition

STEWART, JOHN STEWART, JOHN Name: Name: 731 BARBER CIRCLE 731 BARBER CIRCLE Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: LAKELAND, FL 33803 US

() Delete Title: D Title: (X) Change () Addition

Name: BANKS, ANN Name: ELLIOTT, JOYCE Address: 731 BARBER CIRCLE Address: 758 BARBER CIRCLE City-St-Zip: LAKELAND, FL 33803 City-St-Zip: LAKELAND, FL 33803 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROY M. WESTBERG D/T 02/03/2009