


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2008 08:00 AM
Secretary of State

DOCUMENT # 726052 1. Entity Name IMPERIAL POINT CONDOMINIUM V ASSOCIATION, INC.	
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Principal Place of Business C/O INFINITI PROPERTY INC. 1301 SEMINOLE BLVD., SUITE #110 LARGO FL 33770 US	Mailing Address C/O INFINITI PROPERTY 1301 SEMINOLE BLVD., SUITE #110 LARGO FL 33770 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number 59-1535732	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 INFINITI PROPERTY MANAGEMENT 1301 SEMINOLE BLVD., SUITE #110 LARGO FL 33770	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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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 _____ DATE _____

Signature, typed or printed name of registered agent and filed applicant. (NOTE: Registered Agent signature is required when reinstating)

FILE NOW. FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	SCHMIDTCHEN, GLORIA M
STREET ADDRESS	10215 REGAL DR #23
CITY-ST-ZIP	LARGO FL 33774
TITLE	PD <input type="checkbox"/> Delete
NAME	MCARTHUR, ROBERT
STREET ADDRESS	10215 REGAL DRIVE #12
CITY-ST-ZIP	LARGO FL 33774
TITLE	VD <input type="checkbox"/> Delete
NAME	STORIE, RAE D
STREET ADDRESS	10215 REGAL DR 16
CITY-ST-ZIP	LARGO FL 33774
TITLE	STD <input type="checkbox"/> Delete
NAME	FRIEDMAN, JOAN
STREET ADDRESS	10215 REGAL DRIVE #25
CITY-ST-ZIP	LARGO FL 33774
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UG00000864878
STREET ADDRESS	04/07/08-80005-007 61.25
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE: *Robert McArthur*

3/16/08