

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726052

FILED
Jan 22, 2010
Secretary of State

Entity Name: IMPERIAL POINT CONDOMINIUM V ASSOCIATION, INC.

Current Principal Place of Business:

C/O QUALIFIED PROPERTY MGMT INC.
1301 SEMINOLE BLVD., SUITE #110
LARGO, FL 33770 US

New Principal Place of Business:

Current Mailing Address:

C/O QUALIFIED PROPERTY MGMT., INC.
1301 SEMINOLE BLVD., SUITE #110
LARGO, FL 33770 US

New Mailing Address:

FEI Number: 59-1535732 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT
5901 US 19 N.
SUITE 7Q
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: TD
Name: SCHMIDTCHEN, GLORIA M
Address: 10215 REGAL DR #23
City-St-Zip: LARGO, FL 33774

Title: VD
Name: STORIE, RAE D
Address: 10215 REGAL DRIVE #16
City-St-Zip: LARGO, FL 33774

Title: VD
Name: STORIE, RAE D
Address: 10215 REGAL DR #16
City-St-Zip: LARGO, FL 33774

Title: D
Name: RENDER, ANNABELLE
Address: 10215 REGAL DRIVE #23
City-St-Zip: LARGO, FL 33774

Title: SD
Name: WILLIAMS, PAMELA
Address: 10215 REGAL DRIVE, #46
City-St-Zip: LARGO, FL 33774

I hereby 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 all other like empowered.

SIGNATURE: RAE D. STORIE

VD

01/22/2010

Electronic Signature of Signing Officer or Director

Date