FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

'1998

Largo Fl

LARGO FL

LA HAIE, JIM

LARGO FL

PICKARD, CARL

13500 LAS PALMAS DR

13368 HACIENDA DRIVE

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

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33774

13774



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

DEI PRADO IMPERIAL ASSOCIATION INC

DEL FRADO RVIFERIAL AGSOCIATION, 1110.										
Principal Place of Business Mailing Address							1 10011/100/0 7100/1011/121/1 20/0/ 170/ 0/0/1),, 21011 419 1		
13523 CORDOVA DR LARGO FL 33774 US			13523 CORDOVA DR LARGO FL 33774 US				Date Incorporated or Qualified 02/13/1974 FEI Number		Applied For	
					23-7422283		Not Applicable			
2. Principal Place of Business 21			2a. Mailing Address 26				5. Certificate of Status Desired	T	5 Additional Required	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees	
City & State			City & State				7. Is this nonprofit corporation a homeowners association? Yes No			
ZIP	Country	· L.	Zip	├ ─	Country		8. This corporation owes or has paid the cur			
24 25			9	[30]			Personal Property Tax due June 30. L 10. Name and Address of New Registered	Yes	□ No	
Name and Address of Current Registered Agent					81	Name	10, Name and Address of New Registered	Agent		
44444										
CANNISTRARO, BOB 13523 CORDOVA DR.				ľ	82 Street Address (P.O. Box Number is Not Acceptable)					
LARGO FL 33774				ŀ	63					
DATIGO PE 30/174				ļ		A 11	At 7 Code			
					84	City	FL	.	Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE .	Signature, typed or printed name	nt anistered agent and	title if applicable (NC	OTF: Benistered	Ager	ol signature regul	red when reinstating) DATE			
12. OFFICERS AND DIRECTORS 13.						in angli satura 1745	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	PDN)		☐ DELETE	1.1 T)T	LE			Chang	ge 🔲 Addition	
NAME	CAMINISTRARO, B	ОВ		1.2 NA	ME					
STREET ADDRESS	13526 CORDOVA			1.3 ST	REET	ADDRESS				
CITY-ST-ZIP		33774		1.4 CIT	_	T-ZIP		T 2.	A 1192	
TITLE	VP.		☐ DELETE	2.1 TIT				☐ Chang	ge 🔲 Addition	
NAME	BALAITY, DAVID			2.2 NA						
STREET ANNALOS	12KA7 LAG DALMS	:INA		23 011	DEET.	2230004				

STREET ADDRESS 6.4 CITY - ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

2.4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

3.4. CITY - ST - ZIP

3.1 TITLE

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4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

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Camatries 1/21/60 (818) 539-4437

Addition

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Change

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LARGO FL

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Mar 03 1998 8:00am

Secretary of State