

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728801

FILED
Jan 07, 2009
Secretary of State

Entity Name: DEL PRADO IMPERIAL ASSOCIATION, INC.

Current Principal Place of Business:

13523 CORDOVA DR
LARGO, FL 33774 US

New Principal Place of Business:

Current Mailing Address:

13523 CORDOVA DR
LARGO, FL 33774 US

New Mailing Address:

FEI Number: 23-7422283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANNISTRARO, BOB
13523 CORDOVA DR.
LARGO, FL 33774 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: PD () Delete
Name: CANNISTRARO, BOB
Address: 13523 CORDOVA DRIVE
City-St-Zip: LARGO, FL 33774

Title: VD () Delete
Name: SAMARTINO, ADRIENNE
Address: 11145 BELLA LOMA DRIVE
City-St-Zip: LARGO, FL 33774

Title: VD () Delete
Name: PEARCE, MARGARET
Address: 13644 SERENA DRIVE SOUTH
City-St-Zip: LARGO, FL 33774

Title: TD () Delete
Name: BORGELT, WILLIAM
Address: 13664 SERENA DRIVE
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: BORGELT, WILLIAM
Address: 13664 SERENA DRIVE
City-St-Zip: LARGO, FL 33774

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: BOB CANNISTRARO

PD

01/07/2009

Electronic Signature of Signing Officer or Director

Date