2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728801

1. Entity Name

DEL PRADO IMPERIAL ASSOCIATION, INC.



FILED Feb 12, 2003 8:00 am Secretary of State

02-12-2003 90058 023 ****61.25

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Principal Place of Business 13523 CORDOVA DR LARGO FL 33774 US		Mailing Address 13523 CORDOVA DR LARGO FL 33774 US					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 23-	4. FEI Number 23-7422283 Applied For Not Applicable		
Zip Country		Zip	Country			8.75 Add	litional
2. ye	6. Name and Address of Current	Registered Agent	was report Named and		ess of New Registered Ag	ent.	
			Name				
CANNISTRARO, BOB 13523 CORDOVA DR.		Street Address		ddress (P.O. Box Number is N	(P.O. Box Number is Not Acceptable)		
LARGO F	FL 33774						
			City		FL	Zip Code	9
~	Signature, typed or printed name of registered agent		npaign Financing	ure required when reinstating) \$5.00 May Be Added to Fees	Make Check		
10.	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRE		
TITLE	PD	Delete	TITLE	ADDITIONO/OFIANGE		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	CANNISTRARO, BOB 13523 CORDOVA DRIVE LARGO FL 33774	∟ Delete	NAME STREET ADDRESS CITY-ST-ZIP			Orange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RATH, PATRICIA 13579 ANDOVER DRIVE LARGO FL 33774	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FACKLAH, LIOYD 13597 HAS PALMA HARGO FL 33774		☐ Change	▶ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEARCE, MARGARET 13644 SERENA DRIVE SOUTH LARGO FL 33774	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		С	_ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DIRMANN, ROSANNA 10810 DEL PRADO DR W LARGO FL 33774	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FAVELL, THERESA 10797 DEL PRA LARGO, FL. 33	DR. FAST	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THOMAS, DOT 10800 DEL PRADO DR W LARGO FL 33774	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1		Change	☐ Addition
TITLE		☐ Delete	TITLE		C	Change	Addition

12. 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 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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01-06-03

727-539-4437

CR2E037 (10/C