

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2006 8:00 am
Secretary of State

01-09-2006 90038 024 ****61.25

DOCUMENT # 731570

1. Entity Name
**IMPERIAL POINT CONDOMINIUM ASSOCIATION OF FT.
LAUDERDALE, INC.**



Principal Place of Business
**6000 N.E. 22ND WAY
FT. LAUDERDALE, FL 33308**

Mailing Address
**6000 N.E. 22ND WAY
APT. #1A
FT. LAUDERDALE, FL 33308 US**

40900527



01042006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1808576

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**EMMETT, DORIS D
6000 NE 22ND WAY
APT 3B
FT LAUDERDALE, FL 33308**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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 **PD** ☐ Delete
NAME **EMMETT, DORIS D**
STREET ADDRESS **6000 NE 22 WAY 3B**
CITY-ST-ZIP **FT LAUDERDALE, FL 33308**

TITLE **VPD** ☒ Delete
NAME **SANTIAGO, JOSE**
STREET ADDRESS **6000 NE 22 WAY 3G**
CITY-ST-ZIP **FT LAUDERDALE, FL 33308**

TITLE **STD** ☒ Delete
NAME **GITLIN, BERNARD**
STREET ADDRESS **6000 NE 22ND WAY 7F**
CITY-ST-ZIP **FT. LAUDERDALE, FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPD** ☒ Change ☐ Addition
NAME **JOSEPH DELL'ARIA**
STREET ADDRESS **6000 NE 22WAY 7E**
CITY-ST-ZIP **FT. LAUDERDALE, FL. 33308**

TITLE **STD** ☒ Change ☐ Addition
NAME **JOSEPH BRAND**
STREET ADDRESS **6000 NE 22WAY 7A**
CITY-ST-ZIP **FT. LAUDERDALE, FL. 33308**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 Chapter 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:

Doris D Emmett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/5/06 954-792-8681