

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90321 046 ****61.25

DOCUMENT # 746266

1. Entity Name
IMPERIAL POINTE VILLAS ASSOCIATION, INC.



Principal Place of Business
**2430 ESTANCIA BLVD
SUITE 114
CLEARWATER, FL 34621 US**

Mailing Address
**2430 ESTANCIA BLVD
SUITE 114
CLEARWATER, FL 34621 US**

60025429



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01262006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2010276

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NEW IMAGE SPECIALITY SERVICE
5950 66 B TERRACE N
PINELLAS PARK, FL ~~33781~~
33780**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **RYAN, MAE**
STREET ADDRESS **10128 REGAL DR**
CITY-ST-ZIP **LARGO, FL 33774**

TITLE **VP/D.** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **FARNAN, MARY**
STREET ADDRESS **10200 REGAL DR, # 3**
CITY-ST-ZIP **LARGO, FL 33774**

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

TITLE **PD** ☐ Delete
NAME **PRATT, HELEN**
STREET ADDRESS **10140 REGAL DR.**
CITY-ST-ZIP **LARGO, FL 33774**

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

TITLE **D** ☐ Delete
NAME **MEEHAN, PHILLIP**
STREET ADDRESS **10122 REGAL DR.**
CITY-ST-ZIP **LARGO, FL 33774**

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

TITLE **SD** ☐ Delete
NAME **GIST, JOYCE**
STREET ADDRESS **10126 REGAL DR.**
CITY-ST-ZIP **LARGO, FL 33774**

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

TITLE **D** ☐ Delete
NAME **PAWELSKI, NORSERT**
STREET ADDRESS **9937 SO HAMILTON AVE**
CITY-ST-ZIP **CHICAGO, IL 60643**

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:

Helen R Pratt **HELEN R. PRATT, PRES.** 3/29/06 727-595-1042

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

ATTACHMENT

60025429

DOCUMENT # 746266					
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Principal Place of Business 2430 ESTANCIA BLVD SUITE 114 CLEARWATER, FL 34621 US			Mailing Address 2430 ESTANCIA BLVD SUITE 114 CLEARWATER, FL 34621 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent NEW IMAGE SPECIALITY SERVICE 5950 66 B TERRACE N PINELLAS PARK, FL 33781 33780			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 reappointing) 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	
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition	D. Virginia Esposito 10154 Regal Dr. Largo FL 33774	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
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SIGNATURE: <u>HELEN R. PRATT</u> HELEN R. PRATT, PRES. 3/29/06 727-595-1042					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					