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

DOCUMENT # 746266

1. Entity Name

IMPERIAL POINTE VILLAS ASSOCIATION, INC.

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FILED Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90219 001 ****61.25

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Principal Pla 2430 ESTANO SUITE 114 CLEARWATER US			Mailing Address 2430 ESTANCIA BLVD SUITE 114 CLEARWATER FL 34621 US] 				i k i kk i i i i i i i i i i i i i i i i i i	
2. Principal Place of Business 3. Mailing Address						,						
Suite, Apt. #, etc. Suite, Apt. #, e							CHECK HERE IF MAKING CHANGES					
City & Sta	ate		City & State				J3 20 102 10			oplied For ot Applicable		
Zip		Country Zip			Country	5. Certificate of Status Desired See Required Fee Required						
	6. Name a	nd Address of Current	Registered A	gent		7. Name and Address of New Registered Agent						
	-				Name	Name						
FLORIDA CENTRAL MANAGEMENT 2430 ESTANCIA BLVD					Stree	Street Address (P.O. Box Number is Not Acceptable)						
SUITE 1					-						ı	
	NATER FL 346				City				Fl			
		submits this statement fo	r the purpose	of changing its r	registered office	or register	ed agent, or both, in	n the State of Flo	rida. Lam	familiar with,	and accept	
the obliga	ations of registe	red agent.					•					
SIGNATURE	Slanatura binad a	printed name of registered agent	and title if conline	la /NOTE-	: Registered Agent sig	nature required			DATE			
	Signature, typed o	printed harrie or registered agent	and the nappical	16. (1012.	Tregistated Agent alg	natora required	A Wilding		27112			
FILE NOW: FEE IS \$61.25 9. Election Campa Trust Fund Cont					. •	· 🗆	\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State					
10.		OFFICERS AND DIF	RECTORS		11.		ADDITIONS/CHANG	SES TO OFFICE	BS AND D	BECTORS IN	J 10	
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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.

SUBMITURE EXCHERETE LANGES ENSTON 4/1 103 576-0230