

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751170

FILED
Apr 22, 2009
Secretary of State

Entity Name: IMPERIAL OAKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O COMMUNITY ACCOUNTING & MANAGEMENT
40347 US 19 NORTH, STE. 129
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

C/O COMMUNITY ACCOUNTING & MANAGEMENT
40347 US 19 NORTH, STE. 129
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 59-2086507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPOONSTER, JANET K
COMMUNITY ACCTG & MGMT.
40347 US 19 NORTH, SUITE 129
TARPON SPRINGS, FL 34689 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: DP () Delete
Name: MILLER, RICHARD
Address: 3036 EASTLAND BLVD #E109
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: YONTECH, BARBARA
Address: 3038 EASTLAND BLVD., #F-110
City-St-Zip: CLEARWATER, FL 33761

Title: DST () Delete
Name: CALDWELL, SIDNEY L
Address: 30 VILLAGE LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DP () Delete
Name: JAMES, KELLY
Address: 3038 EASTLAND BLVD, F 108
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: SHAW, ROXANNE
Address: 3042 EASTLAND BLVD #H202
City-St-Zip: CLEARWATER, FL 33761

Title: DT (X) Change () Addition
Name: CALDWELL, SIDNEY
Address: 30 VILLAGE LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DS (X) Change () Addition
Name: HOPKINS, JAMES D
Address: 3046 EASTLAND BLVD J106
City-St-Zip: CLEARWATER, FL 33761

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: JANET K SPOONSTER

AGT

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date