
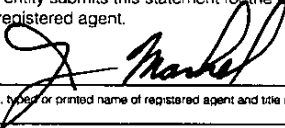
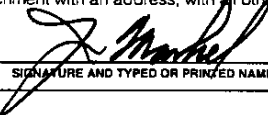


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90286 041 ****61.25

DOCUMENT # 752644					
1. Entity Name IMPERIAL PLACE CONDOMINIUM ASSOCIATION OF SARASOTA COUNTY, INC.					
Principal Place of Business MA-CON, INC 2198 PRINCETON ST. #20 SARASOTA, FL 34237		Mailing Address MA-CON, INC 2198 PRINCETON ST. #20 SARASOTA, FL 34237			
2. Principal Place of Business PROGRESSIVE Community Mgmt, Inc. Suite, Apt. #, etc. 1801 GLENGARY STREET City & State SARASOTA, FL Zip 34231 Country USA		3. Mailing Address PROGRESSIVE Community Mgmt, Inc. Suite, Apt. #, etc. 1801 GLENGARY STREET City & State SARASOTA, FL 3 Zip 34231 Country USA		02242005 Chg-NP CR2E037 (10/03) 4. FEI Number 59-1990512 Applied For Not Applicable	
6. Name and Address of Current Registered Agent WEIL, WARREN MA-CON, INC 2198 PRINCETON ST., #20 SARASOTA, FL 34237			7. Name and Address of New Registered Agent Name PROGRESSIVE COMMUNITY MANAGEMENT, INC. Street Address (P.O. Box Number is Not Acceptable) 1801 GLENGARY STREET City SARASOTA FL Zip Code 34231		
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:  Jim MARKEL DATE: 4/15/05 (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	PD RANKIN, RUTH 5432 SWIFT ROAD SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PELUSO, MICHELLE 5518 SWIFT ROAD SARASOTA, FL 34231	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MERTEN, PAUL 5452 SWIFT ROAD SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HALL, PATRICIA 5416 SWIFT ROAD SARASOTA, FL 34231	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORN, STEVEN 5420 SWIFT ROAD SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MURI, JANICE 5460 SWIFT ROAD SARASOTA, FL 34231	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PELUSO, MICHELLE 5518 SWIFT ROAD SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MARKEL, JIM 1801 GLENGARY STREET SARASOTA, FL 34231	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SUTTON, BILL 1801 GLENGARY STREET SARASOTA, FL 34231	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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.					
SIGNATURE: 		Jim MARKEL DATE: 4/15/05		941-921-5323 Daytime Phone #	