2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 21, 2008 8:00 am Secretary of State **DOCUMENT # 769307** 1. Entity Name 04-21-2008 90053 025 \*\*\*\*61.25 IMPERIAL PLACE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 20000 E. EDGEWOOD DR 20000 E. EDGEWOOD DR SUITE 214 SUITE 214 LAKELAND FL 33803 LAKELAND FL 33803 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Aut. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2884697 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Age 7. Name and Address of New Registered Agent Name STRAIGHT, RICHARD S Street Address (P.O. Box Number is Not Acceptable) 6309 RIVERLAKE COURT BARTOW FL 33830 Zip Code FI 8. The above named entity submits this statem e 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, typod or printed name of registered again and the ill approace (NOTE: Begistered Agent signature (eg ured when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE P Change ☐ Addition REID, KATHY NAME NAME REID, KATHY STREET ADDRESS 1889 VILLAGE CT STREET ADDRESS P. 0 BOX 6010 Lakeland, FL 33807-6010 MULBERRY FL 33860 CITY- ST- ZIP CITY-ST-ZIP ☐ Delate TITLE **X** Addition Change POPE, JAMES W NAME NAME HEISTAND, ROBIN 1813 VILLAGE CT STREET ADDRESS STREET ADDRESS 1804 Village Court Mulberry, FL 33860 MULBERRY FL 33860 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition ELLIOTT, DENNIS NAME NAME STREET ADDRESS 1814 VILLAGE CT STREET ADDRESS MULBERRY FL 33860 CITY-ST-ZIP CITY-ST-ZIP TITLE **X** Deleta TITLE ☐ Change ■ Addition BURY, MIKE NAME NA" Æ 1845 VILLAGE COURT STREET ADDRESS STREET ADDRESS MULBERRY FL 33860 CITY-ST-ZIP CITY-ST-ZIP TIPLE ☐ Delete mile Change ■ Addition STRAIGHT, RICHARD NAME 6309 RIVERLAKE COURT STREET ADDRESS STREET ADDRESS BARTOW FL 33830 CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

**FILED** 

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: \*\*

\*\*EID\*\*

\*\*ATHY REID\*\*

\*\*ATHY REID\*

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information