

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769307

FILED
Apr 09, 2009
Secretary of State

Entity Name: IMPERIAL PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

20000 E. EDGEWOOD DR
SUITE 214
LAKELAND, FL 33803 US

New Principal Place of Business:

2000 E. EDGEWOOD DR
SUITE 214
LAKELAND, FL 33803 US

Current Mailing Address:

20000 E. EDGEWOOD DR
SUITE 214
LAKELAND, FL 33803 US

New Mailing Address:

2000 E. EDGEWOOD DR
SUITE 214
LAKELAND, FL 33803 US

FEI Number: 59-2884697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAIGHT, RICHARD S
6309 RIVERLAKE COURT
BARTOW, FL 33830 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: P () Delete
Name: REID, KATHY
Address: P.O. BOX 6010
City-St-Zip: LAKELAND, FL 33807

Title: D () Delete
Name: POPE, JAMES W
Address: 1813 VILLAGE CT
City-St-Zip: MULBERRY, FL 33860

Title: C () Delete
Name: ELLIOTT, DENNIS
Address: 1814 VILLAGE CT
City-St-Zip: MULBERRY, FL 33860

Title: D (X) Delete
Name: HEISTAND, ROBIN
Address: 1804 VILLAGE COURT
City-St-Zip: MULBERRY, FL 33860

Title: ST (X) Delete
Name: STRAIGHT, RICHARD
Address: 6309 RIVERLAKE COURT
City-St-Zip: BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: POPE, JAMES W
Address: 1813 VILLAGE CT
City-St-Zip: MULBERRY, FL 33860

Title: S/T (X) Change () Addition
Name: STRAIGHT, RICHARD
Address: 6309 RIVERLAKE COURT
City-St-Zip: BARTOW, FL 33830

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

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

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: KATHY REID

P

04/09/2009

Electronic Signature of Signing Officer or Director

Date