2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H69587

Entity Name: IMPERIAL LAKES OF WALTON COUNTY, INC.

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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43 LAIRD RD 43 LAIRD RD

CRESTVIEW, FL 32539 CRESTVIEW, FL 32539 US

Current Mailing Address: New Mailing Address:

43 LAIRD RD 43 LAIRD RD 236 SABINE DRIVE 236 SABINE DRIVE CRESTVIEW, FL 32539 CRESTVIEW, FL 32539

US

FEI Number: 59-2574559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERMENTER, WILLIAM D PERMENTER, WILLIAM D. 110 CHANTECLAIRE CIRCLE 236 SABINE DR

GULF BREEZE, FL 32561 PENSACOLA BEACH, FL 32561 US

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: 01/09/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: PERMENTER, WILLIAM D, PERMENTER, WILLIAM D, . Name: Name:

110 CHANTECLAIRE CIRCLE Address: 236 SABINE DR Address:

City-St-Zip: GULF BREEZE, FL 32561 City-St-Zip: PENSACOLA BEACH, FL 32561 US

Title: Title: (X) Change () Addition () Delete PERMENTER, ELIZABETH, A PERMENTER, ELIZABETH, A Name: Name:

110 CHANTECLAIRE CIRCLE Address: 236 SABINE DR Address:

City-St-Zip: GULF BREEZE, FL 32561 PENSACOLA BEACH, FL 32561 US 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM D. PERMENTER 01/09/2009 D