

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H77481

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: AUGUST IMPERIAL MANAGEMENT, INC.

## Current Principal Place of Business:

5950 IMPERIALAKES BLVD.  
#3  
MULBERRY, FL 33860

## New Principal Place of Business:

## Current Mailing Address:

5950 IMPERIALAKES BLVD.  
#3  
MULBERRY, FL 33860

## New Mailing Address:

FEI Number: 59-2590723      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BURGNER, DEBRA C  
5950 IMPERIALAKES BLVD.  
#3  
MULBERRY, FL 33860 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: BURGNER, DEBRA C.,  
Address: 5120 FORESTGREEN DRIVE WEST  
City-St-Zip: LAKELAND, FL 33811

Title: VSD ( ) Delete  
Name: O'NEAL, RUSSELL L.,  
Address: 6324 FERN LANE  
City-St-Zip: LAKELAND, FL 33813

Title: D ( ) Delete  
Name: SMITH, KENNETH W.,  
Address: 383 LAKE ERIE LANE  
City-St-Zip: MULBERRY, FL 33860

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA C. BURGNER

PTD

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date