

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90924 026 ****61.25

DOCUMENT # N01193

1. Entity Name

IMPERIAL LAKES ESTATES MASTER ASSOCIATION, INC.



Principal Place of Business

8565 CROWN'S CT.
PALMETTO FL 34221

Mailing Address

9031 TOWN CENTER PKWY
BRADENTON FL 34202
US

2. Principal Place of Business

380 Interstate Ct.

3. Mailing Address

380 Interstate Ct.

Suite, Apt. #, etc.

Ste 203

Suite, Apt. #, etc.

Ste 203

City & State

Sarasota FL

City & State

Sarasota FL

Zip

34240

Country

USA

Zip

34240

Country

USA

4. FEI Number **59-2373226**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**WELLS, KEVIN T ESQ.
LOBECK & HANSON, P.A.
2033 MAIN STREET, STE. 403
SARASOTA FL 34237**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	RUSCH, MER	
STREET ADDRESS	8579 COUNTESS AVE. CIR.	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	SD	<input type="checkbox"/> Delete
NAME	TIMMER, GEORGE	
STREET ADDRESS	8533 IMPERIAL CIR	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	TD	<input type="checkbox"/> Delete
NAME	FRANKE, JOHN	
STREET ADDRESS	8473 IMPERIAL CIRCLE	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	RAGGHIANI, TED	
STREET ADDRESS	8438 IMPERIAL CIR	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BILELLO, TOM	
STREET ADDRESS	8529 COUNTESS AVE. CIR.	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Treasurer, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dick Comstock	
STREET ADDRESS	8429 Imperial Circle	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	President, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice-President/Secretary, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Frank Rozell	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Barbara Lyhne	
STREET ADDRESS	8507 Countess Ave. Cir.	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE REQUIRED

3/25/03

CR2E037 (10/02)