

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05624

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: IMPERIAL WILDERNESS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

14100 E. TAMIAMI TRAIL  
NAPLES, FL 34114

**New Principal Place of Business:**

**Current Mailing Address:**

14100 E. TAMIAMI TRAIL  
NAPLES, FL 34114

**New Mailing Address:**

FEI Number: 59-2649305      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FALK, STEVEN  
ROETZEL & ADDRESS  
850 PARK SHORE DR.  
NAPLES, FL 34103 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: SD ( ) Delete  
Name: CALDWELL, DALE  
Address: 14100 E. TAMIAMI TRAIL #93  
City-St-Zip: NAPLES, FL 34114

Title: TD ( ) Delete  
Name: GILFEDDER, CAROLE  
Address: 14100 E. TAMIAMI TRAIL #500  
City-St-Zip: NAPLES, FL 34114

Title: SVD ( ) Delete  
Name: ALLEN, JEAN  
Address: 14100 E. TAMIAMI TRAIL #292  
City-St-Zip: NAPLES, FL 34114

Title: PD ( ) Delete  
Name: LINDSEY, DANIEL  
Address: 14100 E. TAMIAMI TR., 401  
City-St-Zip: NAPLES, FL 34114

Title: FVD ( ) Delete  
Name: BAKER, GREG  
Address: 14100 E. TAMIAMI TRAIL #215  
City-St-Zip: NAPLES, FL 34114

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SVD (X) Change ( ) Addition  
Name: HICKS, MARIE  
Address: 14100 E. TAMIAMI TRAIL #225  
City-St-Zip: NAPLES, FL 34114

Title: PD (X) Change ( ) Addition  
Name: LINDSAY, DANIEL  
Address: 14100 E. TAMIAMI TR., 401  
City-St-Zip: NAPLES, FL 34114

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: DANIEL LINDSAY

PD

01/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date