

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 10:59

DOCUMENT # N14274 (7)

1. Corporation Name

IMPERIAL LAKES ESTATES, UNIT II, CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% ANCHOR PROPERTY MANAGEMENT, INC.
2117 S. DALE MABRY
TAMPA FL 33629

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2117 S. DALE MABRY
TAMPA FL 33629

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1986

3a. Date of Last Report

04/18/1994

4. FEI Number

59-2373226

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANCHOR PROPERTY MANAGEMENT, INC.
5519-B HANLEY RD
TAMPA FL 33634

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PD	LEMMER, ROBERT	8417 IMPERIAL BLVD E	PALMETTO FL
STD	JENKINS, HERMAN	6515 CASTLE GARDEN RD	PALMETTO FL
VPD	CHUGG, ROLAND	8218 IMPERIAL GOLF COURSE BLVD	PALMETO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
P D	Herman Jenkins	8406 Castle Garden Rd	Palmetto, Fl 34221	☒	☐
V/P D	Glyn Benjamin	8453 Imperial Cir.	Palmetto, Fl 34221	☒	☐
S/T D	Richard Comstock	8429 Imperial Cir	Palmetto, Fl 34221	☒	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

REMITTED BY MAY 1

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number