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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

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DIVISION OF CORPORATIONS
95 MAR 30 AM 9:30

DOCUMENT # **N19995** **(2)**

1. Corporation Name

IMPERIAL PARK PLACE VILLAS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% R&P MANAGEMENT ASSOCIATES, INC. 265 AIRPORT ROAD SOUTH NAPLES FL 33942	% R&P MANAGEMENT ASSOCIATES, INC. 265 AIRPORT ROAD SOUTH NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/06/1987
3a. Date of Last Report: 04/05/1994
4. FEI Number: 65-0036843 ☐ 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
21 C/O Shannon Ent.	26 C/O Shannon Ent.
Suite, Apt. #, etc. 22 2500 Tamiami Tr. N. @03	Suite, Apt. #, etc. 27 2500 Tamiami Tr N #205
City & State 23 Naples, Fl	City & State 28 Naples, Fl.
Zip / Country 24 33940 / 25 Collier	Zip / Country 29 33940 / 30 Collier

9. Name and Address of Current Registered Agent

ALFRED, BRIAN
R&P MGMT ASSOCIATES, INC
265 AIRPORT RD SOUTH
NAPLES FL 33942

10. Name and Address of New Registered Agent

31 Name: Jim Shannon
32 Street Address (P.O. Box Number is Not Acceptable): C/O Shannon Enterprises
33: 2500 Tamiami Tr., N. #205
34 City: Naples **FL** 35 Zip Code: 33940

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: James A Alfred — 3-27-95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DST	11 TITLE	PD	☐ Change ☐ Addition
NAME	CRAIG, WALTER	12 NAME		
STREET ADDRESS	13003 IMPERIAL PARK PLACE	13 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	14 CITY-ST-ZIP		
TITLE	~~DX~~	21 TITLE	VD	☐ Change ☐ Addition
NAME	~~KARAL, DONALD~~	22 NAME	Hirsch, Ray	
STREET ADDRESS	~~1307 PARK LAKE DRIVE~~	23 STREET ADDRESS	1349 Park Lake Dr.	
CITY-ST-ZIP	~~NAPLES FL~~	24 CITY-ST-ZIP	Naples, Fl.	
TITLE	~~DX~~	31 TITLE	DST	☐ Change ☐ Addition
NAME	~~KELLER, LEE~~	32 NAME	Stein, Albert	
STREET ADDRESS	~~1350 PARK LAKE DRIVE~~	33 STREET ADDRESS	1302 Park Lake Dr.	
CITY-ST-ZIP	~~NAPLES FL~~	34 CITY-ST-ZIP	Naples, Fl.	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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] 3-27-95 (813)597-3571
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0016990