## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

## FILED **DOCUMENT # N19995** May 18, 2000 8:00 am 1. Entity Name Secretary of State IMPERIAL PARK PLACE VILLAS ASSOCIATION, INC. 05-18-2000 90295 030 \*\*\*\*61.25 Mailing Address Principal Place of Business C/O NEWELL PROPERTY MANAGEMENT C/O NEWELL PROPERTY MANAGEMENT 4148A CORPORATE SOUARE 4148A CORPORATE SQUARE NAPLES FL 34104 NAPLES FL 34104-4753 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0036843 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **NEWELL, WILLIAM** 4148A CORPORATE SQUARE NAPLES FL 34104 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Change Addition ☐ Delete TITLE SPOTTE, WALTER NAME STREET ADDRESS 1381 PARK LAKE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34110 Delete Change TITLE TITLE KARAL DON NAME NAME STREET ADDRESS STREET ADDRESS 1397 PARK LAKE DR CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34T10 Addition Delete ☐ Change STD TITLE TITLE <del>Robelstad, William</del> NAME STREET ADDRESS STREET ADDRESS 1375 PARK LAKE DR CITY-ST-ZIP CITY-ST-ZIP NAPLE FL 34110 Addition Delete Change TITLE TITLE eoster, vincent NAME NAME STREET ADDRESS STREET ADDRESS 49003 PARKTREE COURT CITY-ST-ZIP NAPLES FL 34110 ☐ Addition ☐ Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change NAME STREET ADDRESS 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

9-00