

**2002 UNIFORM BUSINESS REPORT (UBR)****FILED****May 20, 2002 8:00 am**  
**Secretary of State**

05-20-2002 90088 020 \*\*\*\*61.25

**DOCUMENT # N19995**

1. Entity Name

**IMPERIAL PARK PLACE VILLAS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

C/O NEWELL PROPERTY MANAGEMENT  
4148A CORPORATE SQUARE  
NAPLES FL 34104  
USC/O NEWELL PROPERTY MANAGEMENT  
4148A CORPORATE SQUARE  
NAPLES FL 34104  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

**65-0036843**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

City

**FL**

Zip Code

NEWELL, WILLIAM  
4148A CORPORATE SQUARE  
NAPLES FL 34104

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)

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  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME SEWARD, TAYLOR  
STREET ADDRESS 1358 PARK LAKE DRIVE  
CITY-ST-ZIP NAPLES FL 34110TITLE ☐ Change ☒ Addition  
NAME Dates Charles  
STREET ADDRESS 1367 Park Lake Drive  
CITY-ST-ZIP Naples FL 34110TITLE TD ☐ Delete  
NAME SCHROEDER, ROBERT  
STREET ADDRESS 1399 PARK LAKE DRIVE  
CITY-ST-ZIP NAPLES FL 34110TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE VD ☐ Delete  
NAME DEGRAZIA, LORAIN  
STREET ADDRESS 1328 PARK LAKE DRIVE  
CITY-ST-ZIP NAPLES FL 34110TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE SD ☐ Delete  
NAME KERNAN, EDWARD  
STREET ADDRESS 1389 PARK LAKE DRIVE  
CITY-ST-ZIP NAPLES FL 34110TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
SEWARD, TAYLOR

Date

Daytime Phone #

CR2E037 (9/01)