

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22728

FILED
Jun 16, 2009
Secretary of State

Entity Name: IMPERIAL BUSINESS CENTER CONDOMINIUM ASSN. INC.

Current Principal Place of Business:

357 IMPERIAL BLVD.
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1225
CAPE CANAVERAL, FL 32920

New Mailing Address:

200 NORTH FIRST STREET
COCOA BEACH, FL 32931

FEI Number: 59-2870640 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RIGERMAN, MARILYN A.
200 N. FIRST ST.
COCOA BCH, FL 32931 US

Name and Address of New Registered Agent:

RIGERMAN, MARILYN A
200 N. FIRST ST.
COCOA BEACH, FL 32931 US

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: MARILYN A. RIGERMAN

06/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: LINTHICUM, MICHAEL D
Address: 185 BAHAMA BLVD
City-St-Zip: COCOA BEACH, FL 32931

Title: DP () Delete
Name: SCHMITZ, GERRY
Address: 350 BAKER ROAD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: LEASURE, JAMES
Address: 357 IMPERIAL BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: LINTHICUM, MICHAEL D
Address: 185 BAHAMA BLVD
City-St-Zip: COCOA BEACH, FL 32931

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

Title: DS (X) Change () Addition
Name: CARBONE, MICHAEL
Address: 357 IMPERIAL BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: DT () Change (X) Addition
Name: TAPLIN, ROBERT
Address: 357 IMPREIAL BOULEVARD
City-St-Zip: CAPE CANAVERAL, FL 32920

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: GERRY SCHMITZ

P

06/16/2009

Electronic Signature of Signing Officer or Director

Date