

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90054 036 ****61.25

DOCUMENT # N37981
 1. Entity Name
IMPERIAL BONITA ESTATES LOT OWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
 27700 PRAIRIE DR 27700 PRAIRIE DR
 BONITA SPRINGS FL 34135 BONITA SPRINGS FL 34135
 US US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For
65-0191099 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

1st MOORE CR2E037 (10/07)

6. Name and Address of Current Registered Agent
CAMERON, AUDREY
27448 VALIOS DR
BONITA SPRINGS FL 34135

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL 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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

| 10. OFFICERS AND DIRECTORS | |
|----------------------------|---|
| TITLE | P <input type="checkbox"/> Delete |
| NAME | HERSBERGER, LOREN |
| STREET ADDRESS | 27433 VALOIS DR |
| CITY-ST-ZIP | BONITA SPRINGS FL 34135 |
| TITLE | VP <input type="checkbox"/> Delete |
| NAME | SMALL, HERMAN |
| STREET ADDRESS | 27463 DUVERNAY DR |
| CITY-ST-ZIP | BONITA SPRINGS FL 34135 |
| TITLE | D <input checked="" type="checkbox"/> Delete |
| NAME | FIELD, BRUCE |
| STREET ADDRESS | 27340 VALOIS DR |
| CITY-ST-ZIP | BONITA SPRINGS FL 34135 |
| TITLE | D <input checked="" type="checkbox"/> Delete |
| NAME | ROSS, DAVE |
| STREET ADDRESS | 27321 DUVERNAY DR |
| CITY-ST-ZIP | BONITA SPRINGS FL 34135 |
| TITLE | D <input checked="" type="checkbox"/> Delete |
| NAME | DEVORE, LARRY |
| STREET ADDRESS | 27448 BOURBONNIERE |
| CITY-ST-ZIP | BONITA SPRINGS FL 34135 |
| TITLE | D <input checked="" type="checkbox"/> Delete |
| NAME | BAMFORD, SUE |
| STREET ADDRESS | 27483 DUVERNAY DR |
| CITY-ST-ZIP | BONITA SPRINGS FL 34135 |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|--|
| TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | <i>D Brazeau Francis.</i> |
| STREET ADDRESS | <i>27262 Bourbonniere Dr.</i> |
| CITY-ST-ZIP | <i>Bonita Springs, 34135</i> |
| TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | <i>D-Lipscomb Lawrence</i> |
| STREET ADDRESS | <i>27357 Duvernay Dr.</i> |
| CITY-ST-ZIP | <i>Bonita Springs FL 34135</i> |
| TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | <i>D Sandra Masters.</i> |
| STREET ADDRESS | <i>27433 Rue Viou Ave.</i> |
| CITY-ST-ZIP | <i>Bonita Springs, FL 34135</i> |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Audrey Cameron* *4-7-02 239-495-7566*