2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2004
Secretary of State

DOCUMENT# N42852

Entity Name: IMPERIAL BIRD CLUB, INC.

Current Principal Place of Business:

520 PEARSON'S PATH
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

102 JOSHUA CT
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 59-3054449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUDD, MAY
102 JOSHUA CT
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	SD	( ) Delete
Name:	HERRING, FRAN	
Address:	97 N 6TH ST	
City-St-Zip:	LAKE HAMILTON, FL 33851	
Title:	TD	( ) Delete
Name:	RUDD, MAY	
Address:	102 JOSHUA CT	
City-St-Zip:	AUBURNDALE, FL	
Title:	PD	( ) Delete
Name:	PEARSON, RICHARD	
Address:	520 PEARSON PATH	
City-St-Zip:	AUBURNDALE, FL 33823	
Title:	VPD	( ) Delete
Name:	SUSTMAN, VERNON	
Address:	3009 HICKORY ST	
City-St-Zip:	WINTER HAVEN, FL 33881	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VPD	(X) Change ( ) Addition
Name:	YATES, HARLES	
Address:	502 HOLT CR	
City-St-Zip:	WINTER HAVEN, FL 33880	
Title:	DR	( ) Change (X) Addition
Name:	BAXTER, JIM	
Address:	4533 WESTON CT	
City-St-Zip:	BARTOW, FL 33830	
Title:	DR	( ) Change (X) Addition
Name:	BAXTER, JUNE	
Address:	4533 WESTON CT	
City-St-Zip:	BARTOW, FL 33830	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MAY RUDD TR 02/03/2004
Electronic Signature of Signing Officer or Director — Date

BARNARD, DEBRA DIRECTOR
1070 VOX HUNT DR
WINTER HAVEN, FL 33823

HALLEY, PENNY DIRECTOR
P.O. BOX 644
LAKE ALFRED, FL 33850

BARNARD, DEBRA DIRECTOR
1070 VOX HUNT DR
WINTER HAVEN, FL 33823

HALLEY, PENNY DIRECTOR
P.O. BOX 644
LAKE ALFRED, FL 33850