

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42852

FILED  
Mar 08, 2005  
Secretary of State

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: YATES, HARLES  
Address: 502 HOLT CR  
City-St-Zip: WINTER HAVEN, FL 33880

Title: DR ( ) Delete  
Name: BAXTER, JIM  
Address: 4533 WESTON CT  
City-St-Zip: BARTOW, FL 33830

Title: DR ( ) Delete  
Name: BAXTER, JUNE  
Address: 4533 WESTON CT  
City-St-Zip: BARTOW, FL 33830

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

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

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

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

TD

03/08/2005

Electronic Signature of Signing Officer or Director

Date