## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 19, 2001 8:00 am § Secretary of State DOCUMENT # N93000004429 1. Entity Name IMPERIALAKES COMMUNITY SERVICES ASSOCIATION V, I 03-19-2001 90484 046 \*\*\*\*61 25 Mailing Address Principal Place of Business C/O AUGUST IMPERIAL MANAGEMENT INC. C/O AUGUST IMPERIAL MANAGEMENT INC. 5925 IMPERIAL PKWY. #110 5925 IMPERIAL PKWY. #110 MULBERRY FL 33860 MULBERRY FL 33860 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0528015 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) AUGUST IMPERIAL MANAGEMENT, INC. 5925 IMPERIAL PKWY. #110 MULBERRY FL 33860 Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition ☐ Change ۷D ☐ Delete TITLE $\mathcal{D}$ TITLE STAGE, DALE NAME NAME STREET ADDRESS 3704 OPAL DR. STREET ADDRESS CITY-ST-ZIP **MULBERRY FL** CITY-ST-ZIP D ☐ Addition ☐ Change PD ☐ Delete TITLE TITLE. MEISTER, JACK NAME NAME 3534 DIAMOND TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MULBERRY FL ☐ Addition TD D Change ☐ Delete TITLE TITI F HANNUM, MARCIA NAME NAME STREET ADDRESS 3544 DIAMOND TERR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MULBERRY FL ☐ Addition Change Change ☐ Delete TITLE D TITLE PITT. ANDREA NAME NAME 3553 DIAMOND TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MULBERRY FL CITY-ST-ZIP POTRISH COULINS ☐ Change Addition ☐ Delete TITLE TITLE 3454 DIAMOND TERRACE NAME NAME STREET ADDRESS STREET ADDRESS MULBERRY, FL. 33860 CITY-ST-ZIP CITY-ST-ZIP VPD PENNIS FLOCKHART **Addition** TITLE ☐ Detete 3664 OPAL DRIVE NAME NAME STREET ADDRESS MULBERRY, FL 33860 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.

MEISTER

CITY-ST-ZIP

863, 647, 1590

**FILED**