

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001180

FILED  
Mar 09, 2010  
Secretary of State

**Entity Name:** IMPERIAL POLK ADVERTISING FEDERATION, INC.

**Current Principal Place of Business:**

6607 GREEN RD.  
LAKELAND, FL 33809

**New Principal Place of Business:**

**Current Mailing Address:**

6607 GREEN RD.  
LAKELAND, FL 33809

**New Mailing Address:**

**FEI Number:** 59-3318395

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRADLEY, YVONNE M  
6607 GREEN RD.  
LAKELAND, FL 33809 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: PD  
Name: KOEHLER, FRED  
Address: 716 S WILSON AVENUE  
City-St-Zip: LAKELAND, FL 33801

Title: D  
Name: SCOTT, MARYBETH  
Address: 701 W LIME STREET  
City-St-Zip: LAKELAND, FL 33815

Title: D  
Name: NIKDEL, CHRISTINE  
Address: 62 FOURTH STREET, NW  
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD  
Name: BURTZ, MONA  
Address: 1420 MAPLE STREET  
City-St-Zip: LAKELAND, FL 33810

Title: PPD  
Name: KNEPPER, J. DAVID  
Address: 403 CAROLINA AVENUE  
City-St-Zip: PLANT CITY, FL 33563

Title: D  
Name: REED, ALLEN  
Address: 6810 NEW TAMPA HWY, STE. 200  
City-St-Zip: LAKELAND, FL 33815

I hereby 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 all other like empowered.

SIGNATURE: MARYBETH SCOTT

DIR

03/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date