2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2011
Secretary of State

DOCUMENT# N99000000972

Entity Name: IMPERIAL LAKES OF WALTON COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1570 CASWELL ROAD
DEFUNIAK SPRINGS, FL 32433 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1065
DEFUNIAK SPRINGS, FL 32435 U

New Mailing Address:

FEI Number: 59-2963649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERTS, BONNIE J
1570 CASWELL RD
DEFUNIAK SPRINGS, FL 32433 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: D
Name: BAKER, JOSEPH
Address: 4594 ST HWY 83N
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: C
Name: HUGHES, VERONICA
Address: 1624 CASWELL ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: D
Name: ROBERTS, TIMOTHY W
Address: 1570 CASWELL ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: ST
Name: ROBERTS, BONNIE
Address: 1570 CASWELL RD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: D
Name: ALFORD, DARLENE
Address: 126 W. KENNEMUR DR.
City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US

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: BONNIE J ROBERTS ST 03/04/2011

Electronic Signature of Signing Officer or Director Date