## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 03, 2001 8:00 am Secretary of State DOCUMENT # P98000028432 1. Entity Name IMPERIAL DEVELOPMENT COMPANY, INC. 05-03-2001 91122 012 \*\*\*150.00 Principal Place of Business Mailing Address 13575 58TH STREET NORTH 13575 58TH STREET NORTH SUITE 144. THE SUMMIT BUILDING SUITE 144, THE SUMMIT BUILDING CLEARWATER FL 33760 CLEARWATER FL 33760 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 65-0724199 Applied For Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JEFFRIES, DAVID M Street Address (P.O. Box Number is Not Acceptable) 220 SO. FRANKLIN ST. TAMPA FL 33602 City 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 Signature, typed or printed name of registered agent and title if applicable, DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Addition Change TITLE ☐ Delete TITLE BRADFORD, DENNIS D NAME 13575 -58TH ST N. STE 144 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33760 CITY-ST-ZIP ☐ Delete Addition NAME Lubeck, Daniel E NAME STREET ADDRESS 13575 -58TH ST N. STE 144 STREET ADDRESS **CLEARWATER FL 33760** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE TITLE ☐ Change ☐ Delete Lubeck, Joseph G NAME NAME STREET ADDRESS 13575 -58TH ST N. STE 144 STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33760 CITY-ST-ZIP TITI F ☐ Delete TITLE Change ☐ Addition REPKA, JARED NAME NAME 150 MARINA DELRAY CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33767** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition SEGAL, RICHARD J NAME NAME 150 MARINA DELRAY CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP ☐ Detete TITLE Change Addition

13. Thereby certify that the information supplied with this filling 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 trusted expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an applicate, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

Joseph G. Lubeck