

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713462

Entity Name: IMPERIAL PARK OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2063 ENVOY CT.
CLEARWATER, FL 33764**Current Mailing Address:**P.O. BOX 4576
CLEARWATER, FL 33758 US**FEI Number: 59-2745934****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GRIMES, GARRETT TRES
2063 ENVOY CT
CLEARWATER, FL 33764 US*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**Officer/Director Detail :**

Title	PRES
Name	MCGINNIS, CAROLYN
Address	1448 AMBASSADOR DR
City-State-Zip:	CLEARWATER FL 33764

Title	VP
Name	BURKE, TRISH
Address	1465 EMBASSY DRIVE
City-State-Zip:	CLEARWATER FL 33764

Title	SECY
Name	BAYLIS, SUSAN
Address	1459 AMBASSADOR DR
City-State-Zip:	CLEARWATER FL 33764

Title	TRES
Name	GRIMES, GARRETT
Address	2063 ENVOY CT
City-State-Zip:	CLEARWATER FL 33764

Title	DIR
Name	CARROLL, CHRISTOPHER
Address	2064 ATTACHE CT
City-State-Zip:	CLEARWATER FL 33764

Title	DIR
Name	BLOOD, CHRIS
Address	2055 ATTACHE CT
City-State-Zip:	CLEARWATER FL 33764

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: GARRETT J. GRIMES**TREASURER****05/01/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date