

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742169

**Entity Name:** IMPERIAL COVE CONDOMINIUM XIII ASSOCIATION, INC.

**Current Principal Place of Business:**

19029 US HWY 19 NORTH  
CLUBHOUSE  
CLEARWATER, FL 33764

**Current Mailing Address:**

19029 US HWY 19 NORTH  
CLUBHOUSE  
CLEARWATER, FL 33764 US

**FEI Number: 59-1843081**

**Certificate of Status Desired: No**

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

PARKER, RABIN P.A.  
28095 US HWY 19 N STE 301  
CLEARWATER, FL 33761 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            PRESIDENT  
Name            GILLILAND, ED  
Address        19029 US HWY 19 N 32-C  
City-State-Zip: CLEARWATER FL 33764

Title            DIRECTOR  
Name            THOMPSON, JUDY  
Address        19029 US HWY 19 N 31B  
City-State-Zip: CLEARWATER FL 33764

Title            SECRETARY  
Name            REILLY, KEVIN  
Address        19029 US HWY 19 N 28-A  
City-State-Zip: CLEARWATER FL 33764

Title            TREASURER  
Name            HOCHREIN, FRED  
Address        19029 US HWY 19 N 32-D  
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: EDWIN GILLILAND**

**PRESIDENT**

**03/22/2021**

Electronic Signature of Signing Officer/Director Detail

Date