

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 744679 (2)

1. Corporation Name

THE VILLAS OF INVERRARY ASSOCIATION, INC.



Principal Place of Business

Mailing Address

5717 LIME HILL RD.
LAUDERHILL FL 33319
US

5717 LIME HILL RD.
LAUDERHILL FL 33319
US

3. Date Incorporated or Qualified
10/23/1978

3a. Date of Last Report
03/16/1995

2. Principal Place of Business

2a. Mailing Address

21 5721 Lime Hill Rd

26 5721 Lime Hill Rd

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

22 Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

23 City & State
Lauderhill, FL

27 City & State
Lauderhill, FL

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

24 Zip
33319

Country

29 Zip
33319

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEISS, AL
5717 LIME HILL RD.
LAUDERHILL, FL FL 33319**

81 Name
JO ANN WOODS

82 Street Address (P.O. Box Number is Not Acceptable)
5721 Lime Hill Rd

83

84 City
Lauderhill, FL

85 Zip Code
33319

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Jo Ann Woods
Signature typed or printed name of registered agent (and title, if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

3/5/96

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
PALEY, RONALD
5711 LIME HILL RD
LAUDERHILL FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
WEISS, AL
5717 LIME HILL RD.
LAUDERHILL FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
BANNER, DEBBIE
5612 LIME HILL RD
LAUDERHILL FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
WOODS, JOANNE
5721 LIME HILL RD
LAUDERHILL FL** ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
**V/D
Dave Mestecky
5612 Lime Hill Rd
Lauderhill, FL 33319** ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
**P/D
Jo Ann Woods
5121 Lime Hill Rd
Lauderhill, FL 33319** ☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
**T/D/S
Julie Romero
5610 Lime Hill Rd
Lauderhill, FL 33319** ☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jo Ann Woods
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/96

Date

Daytime Phone #

**937-6730
(305)-391-457**

CR2E037 (12/95)