

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 24 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 746792 (1)
1. Corporation Name
THE ESTATES OF INVERRARY HOMEOWNERS ASSOCIATION,
INC.

Principal Place of Business Mailing Address
6800 N.W. 44TH CT.
P.O. BOX 26928
LAUDERHILL FL 33320
6800 N.W. 44TH CT.
P.O. BOX 26928
LAUDERHILL FL 33320

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/19/1979 3a. Date of Last Report 02/01/1994
4. FEI Number 65-0188836 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country
24

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRAMER, HOWARD A
6901 NW 46TH CT
LAUDERHILL FL 33319

81 Name STANLEY WINESER
82 Street Address (P.O. Box Number is Not Acceptable) 6741 N.W. 46 CT.
83
84 City LAUDERHILL FL 85 Zip Code 33319

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Stanley Wineser
Signature typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME KRAMER, HOWARD
STREET ADDRESS 6901 NW 46TH CT.
CITY-ST-ZIP LAUDERHILL FL
TITLE DS Director Secretary
NAME WINESER, STANLEY
STREET ADDRESS 6741 N.W. 46TH CT.
CITY-ST-ZIP LAUDERHILL FL
TITLE DT Director Treasurer
NAME GAUCHER, SONA
STREET ADDRESS 6921 NW 46TH CT
CITY-ST-ZIP LAUDERHILL FL
TITLE VD
NAME MAEL, BOBBIE
STREET ADDRESS 4571 N.W. 70TH AVENUE
CITY-ST-ZIP LAUDERHILL FL
TITLE D
NAME RUTLEDGE, FRED
STREET ADDRESS 6881 N.W. 44TH COURT
CITY-ST-ZIP LAUDERHILL FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE KERRY BARBER Change Addition
1.2 NAME 6741 NW 45TH CT. President/Director
1.3 STREET ADDRESS LAUDERHILL FL 33319
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE DORIAN CIOLEK Change Addition
4.2 NAME 6801 NW 45TH ST. Vice President/Director
4.3 STREET ADDRESS LAUDERHILL FL 33319
4.4 CITY-ST-ZIP
5.1 TITLE JAMES WILKIN Change Addition
5.2 NAME 4521 NW 70TH AVE Director
5.3 STREET ADDRESS LAUDERHILL FL 33319
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 110.07(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 I am an officer, director, receiver, or trustee.

SIGNATURE: Stanley Wineser
Signature typed or printed name of signing officer or director

3/7/95 (305) 748-7377
Date Daytime Phone #