

FILE NOW: FILING FEE IS \$61.25

FILED

Aug 11 1998 8:00am

Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **746792**
1. Corporation Name
**THE ESTATES OF INVERRARY
HOMEOWNERS ASSOC. INC.**

Principal Place of Business SUNRAE MANAGEMENT SERVICES, INC. 4000 N. STATE RD. 7th STE. 408A LAUDERDALE LAKES, FL 33319	Mailing Address SUNRAE MANAGEMENT SERVICES, INC. 4000 N. STATE RD. 7th STE. 408A LAUDERDALE LAKES, FL 33319
--	--

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

3. Date Incorporated or Qualified 4-19-99	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. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		

9. Name and Address of Current Registered Agent
**Becker + Poliakoff, PA
P.O. Box 9057
Dtd. LAUDERDALE, FL 33310-9057**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box, Suite, etc. if applicable)
83 City
84 Zip Code
**SUNRAE MANAGEMENT
SERVICES, INC.
4000 N. STATE RD. 7th STE. 408A
LAUDERDALE LAKES, FL 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 **[Signature]** DATE **6-15-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(PRES.) ROBBIE MAEL-SCHMIDT 4571 NW 70 AVE. LAUDERDALE, FL 33319	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	(Pres) Deborah K. Willis 6711 NW 46 CT LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(VP) WYLIE HOWARD 6920 NW 44 CT LAUDERDALE, FL 33319	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	(VP) Richard Campbell 4501 NW 70 AVE LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(STREAS) MERYL KRAMER 6901 NW 46 CT LAUDERDALE, FL 33319	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	(Secy) Phyllis Kitson 6820 NW 45 ST LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(T) Shalomi Offir 4550 NW 70 AVE. LAUDERDALE, FL 33319	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	(Tres) Wylie Howard 6920 NW 44 CT LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(T.D.K.) WILLIS 6711 NW 46 COURT LAUDERDALE, FL 33319	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	(T) Frank Lloyd 4570 NW 70 Ave LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(T) FRANK Lloyd 4570 NW 70 AVE. LAUDERDALE, FL 33319	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	500002615275 -08/13/98-01084-038 ***61.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E037 (10/97)