2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #746792

1. Entity Name



Mar 26, 2007 8:00 am Secretary of State 03-26-2007 90058 018 ****61.25

FILED

THE ESTATES OF INVERRARY HON ASSOCIATION, INC.	IEOWNERS

Principal Place of Business

Mailing Address

4551 NW 67TH TERRACE 4551 NW 67TH TERRACE LAUDERHILL, FL 33319 US LAUDERHILL, FL 33319 US					•	•					
Principal Place of Business - No P.O. Box # Address											
Suite, Apt. #, etc. Su			uite, Apt. #, etc.				02052007 Chg-NP CR2E037 (12/06)				
City & State C			City & State				4. FEI Number 65-018883	6			oplied For
Zìp	Country	Zip	Zip Cou				5. Certificate of St	atus Desired		8.75 Ade	ditional
	6. Name and Address of Current	Registered	Agent				7. Name and Add	ress of New Re		•	-
					Name						
ROBERTS	•			}	Street Address (P.O. Box Number is Not Acceptable)						
	37 TERRACE ILL, FL 33319				Street A	uuress (r	P.O. BOX Number is i	voi Acceptable)			
LAUDERN	ILL, FL 33319			Ì							
					City				FL	Zip Coo	le
8. The above	named entity submits this statement for	or the nurnos	se of changing its re	oistere	d office or	register	ed agent, or both, in	the State of Flori		 amiliar with.	and accept
	ions of registered agent.	parpoo	or or all agency no re	· g. c. c. c		· og.o.o.					
SIGNATURE .										_	
	Signature, typed or printed name of registered agen	t and title if applic	sable. (NOTE: I	Registered	Agent signati	ure required	when reinstating)		DATE		
Filing Fee is \$61.25 9. Election Campaign F Due by May 1, 2007 Trust Fund Contributi					\$5.00 May Be Added to Fees Make check payable to Florida Department of State						
10.	OFFICERS AND D	IDECTORS		11.			ADDITIONS/CHANG	ES TO OFFICER	S AND DIE	ECTORS IN	L 10
TITLE	PD	INCOTORIS	☐ Delete	TITLE			DDITIONS/CHANG	LO TO OFFICER	O AND DIT	Change	Addition
NAME	ROBERTS, LAMONT		L Descle	NAME							L. Addition
STREET ADORESS	4551 NW 67TH TERRACE				ET ADDRESS						
CITY-ST-ZIP	LAUDERHILL, FL 33319				-ST-ZIP						
TITLE	TD		☐ Delete	MLE						☐ Change	Addition
NAME	KLIGFELD, EDWARD			NAME		i					
STREET ADDRESS	4580 N.W. 67TH TERR.			STREE	ET ADDRESS						
CETY-ST-ZIP	LAUDERHILL, FL 33319			CITY	ST-ZIP						
TITLE	SD		☐ Delete	TITLE						☐ Change	☐ Addition
NAME	SIMMONS, GLENNIE			NAME							_
STREET ADDRESS	6721 NW 46TH CRT			STREE	ET ADDRESS						
CITY-SI-ZIP	LAUDERHILL, FL 33319			CITY-	ST-ZIP						
TITLE	VD		Delete	TITLE		VD				☐ Change	Addition
NAME	DWYER, JULIAN			NAME		WAT	750N, GWG	NETH			
STREET ADDRESS	4421 NW 70TH AVE Z				et address	6800	NW 45	M 2000			
CITY-ST-ZIP	LAUDERHILL, FL 33319			CITY-	-ST-ZIP	LAU	SON, GWG NW 45 1DERHALL	<u>.F.6.333</u>	>14		
TITLE	VD		☐ Delete	TITLE		-		1	!	☐ Change	☐ Addition
NAME	ALLEYENE, JUANITA			NAME							
STREET ADDRESS	6841 NW 45TH COURT				ET ADDRESS						
CITY-ST-ZIP	LAUDERHILL, FL 33319				-ST-ZIP						
TITLE			☐ Delete	TITLE						☐ Change	☐ Addition
NAME	1			NAME							
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS - St-Zip						1
				UIII.	- 31-51L	ī					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ENNAED KLIGFELD ING OFFICER OR DIRECTOR 3-22-07