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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

755398

(5)

INVERWOOD CONDOMINIUM ASSOCIATION, INC.



incipal Place of Business		Mailing Address					
5500 NW 44TH ST LAUDERHILL FL 33319		5500 NW 44TH ST LAUDERHILL FL 33319)				
					3. Date Incorporated or Qualified 12/05/1980	3a. Date of L 03/2	ast Report 4/1995
Principal Place of Busin	nss	2a. Mailing Address			4. FEI Number	- 1	Applied For
Trincipal Flace of Edol	030	26			59-2044793	Γ	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				_ \$8	.75 Additional
Stitle, Apt. #, etc.		27			5. Certificate of Status Desired	T -	ee Required
City & State		City & State			6. Election Campaign Financing	\$1	5.00 May Be
0.1, 0.01.10		28			Trust Fund Contribution		dded to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability for in	angible tax unde	er s. 199.032,
	25	29	30		Florida Statutes 4	Yes 🗌 No	
9. Name	and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
			8	1 Name			
COURTNEY, PATE	A ALOK		8	2 Struct Δd	kiress (P.O. Box Number is Not Acceptable	3)	
5570 NW 44TH S				- Direct Au			
33/U NIT 77/N 3	11		8	3			
, LAUDERHILL FL 3	2210		-			85	Zip Code
EXODERINE TEX	3013		0	City		FL 🏻 🖺	zip Code
Pursuant to the provis	ions of Sections 617.0502	and 617.1508, Florida Statu	tes, the above	named corp	poration submits this statement for the purp	ose of changing	its registered offic
a consistenced against a	r both, in the State of Florid	ia. Such change was authori	zea by the co	rporation's bo	pard of directors. I hereby accept the appoi	intment as registe	ered agent. I am
or registered agent, o		OH OH, USUS, FIUHUA SHALUNG		/	/	al.ala	,
familiar with, and acco	·		ア	6 C	Larra Tirara	-211.4141	<u> </u>
familiar with, and acci GNATURE Pat 1	icia A. Cou	rtney	Tues	gent signature equ	Authory	2//3/96	<u> </u>
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t up nereby 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 eath; that I am an officer or director of the export flion 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 changes of one of the original with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR