04-25-2001 90131 034 \*\*\*\*61.25

OCI	<b>IMENT</b>	# 75	5398

1. Entity Name

## INVERWOOD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5500 NW 44TH ST LAUDERHILL FL 33319 5500 NW 44TH ST LAUDERHILL FL 33319

. Principal Place of Business	3. Mailing Address
5500 N.W. 44th ST	5500 N.W. 44th ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State		City & State		4. FEI Number	4. FEI Number 59-2044793		Applied For		
LAUDERHILL FL		LAUDERHILL FL						Not Applicable	
Zip Country		Zip	·		5. Certificate o	5. Certificate of Status Desired			
33319	USA	33319 USA		<u>A</u>	7 Nome and 8	dance of New Designature	Fee Required	, ,	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name				
· ·									
COURTNEY, PATRICIA A.				Street Address (P.O. Box Number is Not Acceptable)					
5570 NW 44TH ST.									
VVIV IIII TIIII VII									
, LAUDERHILL FL 33319			City		F	Zip Code	9		
		0 0 0 0 0 0 0 0 0							
8. The above n	amed entity submits this statement for	the purpose of changing its	register	ed office or r	egistered agent, or both	i, in the state of Honda.			
			1	. /	<i>y</i>	ulal	•		
SIGNATURE	PATRICIA COURTNEY		Tun	. J	untreel	4/18/0	/		
SIGNATORE	Ignature, typed or printed name of registered agent a	nd title if applicable. (NOT	E: Registere	ed Agent signature	required when reinstating)	DAT	ΓE		
		T		-/-	<del>//</del>				
	FILE NOW:	9. Election Campaign	n Financ	ing /	\$5.00 May Be	Make Chec	k Payable to	,	
FEE IS \$61.25		Trust Fund Contribution.			Added to Fees		ent of State		
	, , , , , , , , , , , , , , , , , ,					-			
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHA	NGES TO OFFICERS AND	DIRECTORS IN		
TITLE	P	☐ Delete	TITL	.E			☐ Change	Addition	
NAME SAMPSON, HARVEY			NAM	1					
STREET ADDRESS 5550 NW 44TH STREET B 215			- 1	EET ADDRESS					
CITY-ST-ZIP	LAUDERHILL FL		ÇIT	Y-ST-ZIP					
TITLE	D	☐ Delete	TITE				Change	Addition	
NAME	BESOFSKY, ALVIN		NAI	1					
STREET ADDRESS	5570 N W 44TH ST., A416			REET ADDRESS					
CITY-ST-ZIP LAUDERHILL FL 33319				Y-ST-ZIP					
TITLE	D	☐ Delete	TIT				☐ Change	Addition	
NAME VADALA, MIKE			NA.	_					
STREET ADDRESS	5550 NW 44TH ST B416			REET ADDRESS Y-ST-ZIP					
CITY-ST-ZIP	LAUDERHILL FL 33319		<u> </u>						
TITLE	D	☐ Delete	111	i i			☐ Change	☐ Addition	
NAME	SCHINDLER, IRV			ME					
STREET ADDRESS	5570 NW 44TH ST, APT A302		4	REET ADDRESS	·				
CITY-ST-ZIP	LAUDERHILL FL 33319						Cheese	☐ Addition	
TITLE	D	Delete	1	LE ME			☐ Change	Addition	
NAME	SHAPIRO, SID			ME REET ADDRESS					
STREET ADDRESS	5530 NW 44TH ST, C404			IY-ST-ZIP					
CITY-ST-ZIP	LAUDERHILL FL 33319	<del></del>	_				Charac	[ ] Addition	
TITLE	VP	☐ Delete		ILE			☐ Change	Addition	
NAME OTOTET ADDRESS	ROSENTHAL, ANN		- 1	AME REET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	5530 NW 44TH ST C213			TY-ST-ZIP					
CHY-SI-ZIP	LAUDERHILL FL 33319	this filles does not qualify f			11.0	(i) Flaciate Otatutan I further		information	

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

SIGNATURE:

HANNEY SANGASING PRICE OR DIRECTOR

4/18/2001

((954) 731-0100

Daytime Phone #