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Apr 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N07282 (9)
1. Corporation Name
HORIZONS OF INVERRARY CONDOMINIUM D ASSOCIATION, INC.



Principal Place of Business Mailing Address
4373 ROCK ISLAND RD. LAUDERHILL FL 33319 US
4373 ROCK ISLAND RD. LAUDERHILL FL 33319-4520 US

3. Date Incorporated or Qualified 01/22/1985
3a. Date of Last Report 07/11/1996
4. FEI Number 59-2778167 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
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 24 Country 25 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
SEMMER PROPERTY MGMT.
4373 ROCK ISLAND RD.
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent
81 Name CAMPBELL PROPERTY MANAGEMENT
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 Kelly C. Cutenberger 4/11/97
Signature typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD WEISSMANN, LEON 7050 N.W. 44TH STREET, #810 LAUDERDALE FL 33313	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD FUNKLESTEIN, MARTIN 7050 NW 44TH ST #701 LAUDERHILL FL 33313	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	S LEPINE, LEONARD 7050 NW 44TH ST #601 LAUDERHILL FL 33313	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	SECRETARY JODI MIRANDA
STREET ADDRESS		3.3 STREET ADDRESS	7050 N.W. 44 th ST. # 207
CITY-ST-ZIP		3.4 CITY-ST-ZIP	LAUDERHILL, FL. 33313
TITLE	T SHANKMAN, SYDNEY 7050 NW 44TH ST #804 LAUDERHILL FL 33313	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	TREASURER SARAH GORDON
STREET ADDRESS		4.3 STREET ADDRESS	7050 N.W. 44 th ST., # 208
CITY-ST-ZIP		4.4 CITY-ST-ZIP	LAUDERHILL, FL. 33313
TITLE	D SOLOMON, SID 7050 N.W. 44TH STREET, #706 LAUDERHILL FL 33313	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	D. Karl Genari.
STREET ADDRESS		5.3 STREET ADDRESS	7050 NW 44th St #702
CITY-ST-ZIP		5.4 CITY-ST-ZIP	LAUDERHILL, FL 33313
TITLE	D LEIGHTON, SYLVIA 7050 N.W. 44TH STREET, #707 LAUDERHILL FL 33313	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	D SYLVIA LEIGHTON
STREET ADDRESS		6.3 STREET ADDRESS	7050 N.W. 44 th ST., # 107
CITY-ST-ZIP		6.4 CITY-ST-ZIP	LAUDERHILL, FL 33313

14. I do 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.

SIGNATURE: LEON D. WEISSMANN 4/11/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Leon D. Weissmann PRES. Date Daytime Phone # 0035085

CR2E037 (9/96)