2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12311

FILED Apr 06, 2009 Secretary of State

Entity Name: INVERRARY GARDENS MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4200 INVERRARY BLVD 4200 INVERRARY BLVD. FT. LAUDERDALE, FL 33319 LAUDERHILL, FL 33319 **Current Mailing Address: New Mailing Address:** 4200 INVERRARY BLVD 4200 INVERRARY BLVD. FT. LAUDERDALE, FL 33319 LAUDERHILL, FL 33319 FEI Number: 22-2705878 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: FINCH, WESLEY E SCHAPIRA, MOTTI 4200 INVERRARY BLVD. 6111 BROKEN SOUND PARKWAY NW US STE 150 LAUDERHILL, FL 33319 BOCA RATON, FL 33487 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: MOTTI SCHAPIRA 04/06/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DIR () Delete () Change () Addition TWERSKI, LABE Name: Name: 1651 CONEY ISLAND AVE 4TH FLOOR Address: Address: City-St-Zip: BROOKLYN, NY 11230 US City-St-Zip: Title: () Delete Title: (X) Change () Addition FINCH, WESLEY E Name: Name: SCHAPIRA, MOTTI Address: 6111 BROKEN SOUND PARKWAY Address: 4200 INVERRARY BLVD.

Address: 6111 BROKEN SOUND PARKWAY Address: 4200 INVERRARY BLVD.
City-St-Zip: BOCA RATON, FL 33487 US City-St-Zip: LAUDERHILL, FL 33319 US

Title: DIR (X) Delete Title: () Change () Addition

 Name:
 BLACKINTON, DENNIS H
 Name:

 Address:
 6111 BROKEN SOUND PARKWAY NW
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LABE TWERSKI D 04/06/2009