

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90112 001 ***158.75

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000032588

1. Corporation Name
SPECIAL SENIORS OF INVERRARY, INC.



Principal Place of Business 7471 NW 35TH COURT LAUDERHILL FL 33319	Mailing Address 7471 NW 35TH COURT LAUDERHILL FL 33319
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 25	29 30

3. Date Incorporated or Qualified 04/10/1997	
4. FEI Number 65-0751279	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

KENNEDY, SIMONE L
 7471 NW 35TH COURT
 LAUDERHILL FL 33319

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KENNEDY, SIMONE L	
STREET ADDRESS	7471 NW 35TH COURT	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	PRINCE, ROBERT	
STREET ADDRESS	7471 NW 35TH COURT	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE	PATRICK H FISHER (VPD)	<input type="checkbox"/> DELETE
NAME	7421 NW 38CT	
STREET ADDRESS	LAUDERHILL FL 33319	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE	KAREN A. HEGALL (SEC)	<input type="checkbox"/> DELETE
NAME	2903 NW 11 ST	
STREET ADDRESS	CORAL SPRINGS FL 33065	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PATRICK H V.P.D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PATRICK H FISHER	
1.3 STREET ADDRESS	7421 NW 38CT	
1.4 CITY-ST-ZIP	LAUDERHILL FL 33319	
2.1 TITLE	SECRETARY / ADMINISTRATOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	KAREN S HEGALL	
2.3 STREET ADDRESS	2903 NW 11 ST	
2.4 CITY-ST-ZIP	CORAL SPRINGS FL 33065	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Simone R. Kennedy Pres Date: 1.30.99 Daytime Phone #: 954 746-8550

CR2E034 (11/98)