

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 727233 (9)

1. Corporation Name

HI GREENS OF INVERRARY, INC.

Principal Place of Business

**5800 NW 44TH STREET
LAUDERHILL FL 33319**

Mailing Address

**5800 NW 44TH STREET
LAUDERHILL FL 33319**



3. Date Incorporated or Qualified
08/17/1973

3a. Date of Last Report
06/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

4. FEI Number
59-1554992

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BECKER & POLIAKOFF, P A
6520 NORTH ANDREWS AVE
FT. LAUDERDALE FL 33309**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

I, 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

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 **ST** ☒ DELETE
NAME **GRANT, SANFORD**
STREET ADDRESS **5860 NW 44TH STREET**
CITY-STATE-ZIP **LAUDERHILL FL**

11 TITLE **D ASST. SEC. TREAS D** ☒ Change ☐ Addition
12 NAME **IRWIN GILLENSON**
13 STREET ADDRESS **5860 NW 44TH STREET**
14 CITY-STATE-ZIP **LAUDERHILL FL 33319**

TITLE **D** ☐ DELETE
NAME **V CORSI, HENRY**
STREET ADDRESS **5860 NW 44TH STREET**
CITY-STATE-ZIP **LAUDERHILL FL**

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS

TITLE **D** ☐ DELETE
NAME **S KLEIN, MARTIN**
STREET ADDRESS **5860 NW 44TH STREET**
CITY-STATE-ZIP **LAUDERHILL, FL 00000**

24 CITY-STATE-ZIP
31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS

TITLE **D** ☐ DELETE
NAME **P ZURKOWSKI, ROBERT**
STREET ADDRESS **5860 N.W. 44TH ST.**
CITY-STATE-ZIP **LAUDERHILL, FL 00000**

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

TITLE **D** ☒ DELETE
NAME **L LUTCH, BERNARD**
STREET ADDRESS **5900 NW 44TH ST**
CITY-STATE-ZIP **LAUDERHILL, FL 00000**

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

TITLE **D** ☐ DELETE
NAME **T SCHWARTZ, LESTER**
STREET ADDRESS **5900 NW 44TH ST**
CITY-STATE-ZIP **LAUDERHILL FL**

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. I do hereby 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 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: *Henry R. Corsi* Henry R. Corsi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96 954-735-0525
Daytime Phone: 954-735-0525

CR2E037 (12/95)