2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 17, 2006 8:00 am **Secretary of State DOCUMENT #727233** 01-17-2006 90227 029 ****61.25 HI GREENS OF INVERRARY, INC. Principal Place of Business Mailing Address 5800 NW 44TH STREET 5800 NW 44TH STREET LAUDERHILL, FL 33319 LAUDERHILL, FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122006 Chg-NP CR2E037 (11/05) Applied For 4. FEI Number 59-1554992 City & State City & State Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GATSOS, ELAINE M ESQ Street Address (P.O. Box Number is Not Acceptable) 1499 W PALMETTO PARK RD #210 BOCA RATON, FL. 33486 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Fiorida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. JPIO Addition Delete TITLE ☐ Change TITE SOCONW 44TH STREET KLEIN, STANLEY NAME NAME STREET ADDRESS 5900 NW 44TH ST STREET ADDRESS LAUDERHUL FL 33319 CITY-ST-ZIP LAUDERHILL, FL 33319 CITY-ST-ZIP SD ☐ Defete TITLE AST/0 Change Addition TITLE **BESSI, INGBER** NAME NAME STREET ADDRESS 5860 NW 44TH STREET STREET ADDRESS LAUDERHILL, FL 33319 COY-ST-7P City-St-7P Delete Change TITLE ☐ Addition TITLE ZURKOWSKI, ROBERT NAME 5860 N.W. 44TH ST. STREET ADORESS STREET ADORESS FT. LAUDERDALE, FL 33319 CITY-ST-ZIP CITY-ST-ZIP 719 TD DIDE **Delete** TITLE Change Addition DUNEAN, MARCIA carlos alleyne NAME NAME 5860 NW 44TH STREET STREET ADDRESS 5900 NW 44TH ST. STREET ADDRESS LOUDERHILL FL 33319 CITY-ST-ZIP LAUDERHILL, FL 33319 CITY-ST-ZIP Delete **T** Addition TITLE TITLE Change ADD WALTON NAME NAME 5860 MW 44-TH STREET STREET ADDRESS STREET ADDRESS AUDSPHILL FL 33319 CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition

FILED

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

DOBERT ZUEKOWSKI 13 JUNUARY ZOUL 9947350525 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #