2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2007 8:00 am
Secretary of State
07-19-2007 90022 039 ****70.00

DOCUMENT # 727233

1. Entity Name
HI GREENS OF INVERRARY, INC.

Principal Place of Business	Mailing Address
5800 NW 44TH STREET LAUDERHILL, FL 33319	5800 NW 44TH STREET LAUDERHILL, FL 33319

07122007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1554992 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GATSOS, ELAINE M ESQ 1499 W PALMETTO PARK RD #210 BOCA RATON, FL 33486	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 ELAINE M. GATSOS, ESQ 07/17/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP/D DOVER, ANNETTE 5860 NW 44TH ST. FORT LAUDERDALE, FL 33319	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LILLIAN BERGSTEIN 5900 NW 44 STREET LAUDERHILL FL 33319	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AST BESSI, INGBER 5860 NW 44TH STREET LAUDERHILL, FL 33319	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MARCIA CORSI 5860 NW 44 STREET LAUDERHILL FL 33319	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ZURKOWSKI,ROBERT 5860 N.W. 44TH ST. FT. LAUDERDALE, FL 33319	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D ALLEYNE, CARLOS 5860 NW 44TH ST. FORT LAUDERDALE, FL 33319	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MARY KING 5860 NW 44 STREET LAUDERHILL FL 33319	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D WALTON, ADA 5860 NW 44TH ST. FORT LAUDERDALE, FL 33319	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALFREDO GARCIA 5860 NW 44 ST LAUDERHILL FL 33319	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LESTER SPRINGSTUN 5900 NW 44 STREET LAUDERHILL FL 33319	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: MARY A. KING 07/17/07 954-735-0525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #