## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

737033 DOCUMENT #
1. Corporation Name

(1)

RESIDENTS OF INVERRARY, INC.											
Principal Place			, and the second	Mailing Address 3841 ENVIRON BLVD					<b>ia ii</b> ii <b>a</b> i <b>a</b> ik <b>aia</b> ik i		<b>. 1</b> 11   111
C/O CLAIRE P LAUDERHILL F US	OSTER. APT	429	#429	#429 Lauderhill FL 33319				Date Incorporated or Qualified     10/12/1976		of Last F	
2. Principal Pla	ice of Busine	988	$\vdash$	2a. Mailing Address				4. FEI Number Applied For Not Applied by Applied For Not Applicable			
21   Suite, Apt. #	, etc.		26 Suit	Suite, Apt. #, etc.				Certificate of Status Desired		\$8.75	Additional
22			27 Cdv	City & State							Required
City & State			28	<b>⊢</b> ′				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country 25		Zip	Z <sub>1</sub> p 30		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	9. Name and Address of Current							10. Name and Address of New Registered Agent			
						61	Name				
POSTER,		D #400				82	Street Addi	ress (P.O. Box Number is Not Accepta	ble)		
	iron blv Hll fl 33					83					
						84	City		P-1	<b>85</b> Zip	Code
			00 1017.15	S 51 14 04-14	4bb-			sales a shorts this statement for the p	FL.	oina ite re	soletared office
11. Pursuant to or registere	o the provis ed agent, or	ions of Sections 617.05 both, in the State of Flo	02 and 617,150 orida. Such cha ection 617,0503	98, Florida Statute nge was authorize Florida Statutes	es, the abo ed by the	corpo	ration's boa	ration submits this statement for the p ird of directors. I hereby accept the ap	pointment as r	egistered	agent. I am
SIGNATURE _	in, and acce	prine obligations of oc	0.000								
	Signature, typed	or printed name of registered as	ent and title if applica IND DIRECTOR		If Hogistere 13.	-	signature require	ad when reinstuting) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIBLOTO	RS IN 12
12.	PD	OFFICERS A	IND DIRECTOR	DELETÉ	1.1 T		. [	ADDITIONS OF INTEREST OF ICT OF		Change	Addition
NAME	KLEIN, I				1.2 N	IAME	İ				
STREET ADDRESS		W 44TH ST.		1.3 STREET							
CITY-ST-ZIP TITLE	ZIP LAUDERHILL FL VPD			T DELETE	1.4 CITY - ST - ZIP 2 1 TITLE		- ZIP			Change	Addition
NAME	MARKO	, selig			2 2 NAME						
STREET ADDRESS	6020 N	N 44TH ST.		2.3 STREET ADDRESS		ADDRESS					
CITY-ST-ZIP	LAUDERHILL, FL 00000			C Decrete	2 4 CITY - ST - ZiP 3 1 TITLE		F-ZIP			Change	Addition
TITLE NAME	POSTER	R. CLAIRE		_		3 7 MILE 3 2 NAME			L.	1 ourningo	
STREET ADDRESS		VVIRON BLVD #429					ADDRESS				
CITY - ST - ZIP	LAUDER	RHILL FL				CITY-S	T - ZIP				
TITLE				DELETE		TITLE			L	] Change	☐ Addition
NAME STREET ADDRESS					- 1	NAME STREET.	ADDRESS				
CITY-ST-ZIP						DITY-SI					
TITLE				DELFIE	51	TITLE			Ĺ	] Change	■ Addition
NAME						NAME					
STREET ADDRESS							ADDRESS				
CITY - \$T - ZIP TITLE				DELETE		CITY-S' TITLE	1-ZIF			Change	Addition
NAME					621	NAME					
STREET ADDRESS					6.3	STREET	ADDRESS				
C!TY-ST-ZIP		t the information are a	- ۵۰ منطع طفارس ام	rio valuetarila Far	644	CITY - S	F-ZIP	for the exemption stated in Section 1	9.07(3)(k) Elor	ida Statut	es. I further
	t tha inform	stion indicated on this a	onuni rofoart br	eumolomontal and	nual romant	i ic tri i	o and accur	for the exemption stated in Section 1 rate and that my signature shall have this report as required by Chapter 617,	ie same iedal i	anect as ii	made under
SIGNAT	(	Kairi	Tosi	US E OF SIGNING OFFIC	(	`_L	aire	POSTER 3/	196 -	J14 ghira Phane	184-181