

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Sep 03 1997 8:00am
Secretary of State

DOCUMENT # 741147 (3)

1. Corporation Name

THE INVERRARY MEN'S GOLF ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3840 INVERRARY BLVD.
LAUDERHILL FL 33319

3840 INVERRARY BLVD.
LAUDERHILL FL 33319

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1977

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2454985

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

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

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SALOMONE, MICHAEL J.
7800 WEST OAKLAND PARK BLVD.
SUNRISE FL 33321

81 Name

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

83

84 City

FL

85 Zip Code

11. 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 PD
NAME KAYE, MARTIN
STREET ADDRESS 3840 INVERRARY BLVD.
CITY-ST-ZIP LAUDERHILL FL

☒ DELETE

TITLE VD
NAME STOFF, LAWRENCE
STREET ADDRESS 3840 INVERRARY BLVD.
CITY-ST-ZIP LAUDERHILL FL

☒ DELETE

TITLE SD
NAME FRANK, WALTER
STREET ADDRESS 3840 INVERRARY BLVD.
CITY-ST-ZIP LAUDERHILL FL

☒ DELETE

TITLE TD
NAME KIRMAYER, LEO
STREET ADDRESS 3840 INVERRARY BLVD.
CITY-ST-ZIP LAUDERHILL FL 33319

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE P/D
1.2 NAME ED PORTNER
1.3 STREET ADDRESS 3840 INVERRARY BLVD
1.4 CITY-ST-ZIP LAUDERHILL FL 33319

☒ Change ☐ Addition

2.1 TITLE V/D
2.2 NAME TOM FRANKLIN
2.3 STREET ADDRESS 3840 INVERRARY BLVD
2.4 CITY-ST-ZIP LAUDERHILL FL 33319

☒ Change ☐ Addition

3.1 TITLE S/D
3.2 NAME WALTER FRANKEL
3.3 STREET ADDRESS 3840 INVERRARY BLVD
3.4 CITY-ST-ZIP LAUDERHILL FL 33319

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS SAME
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE REQUIRED

L. N. Treas fl. 954

CR2E037 (4/97)