

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746792

FILED  
Mar 11, 2009  
Secretary of State

**Entity Name:** THE ESTATES OF INVERRARY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4551 NW 67TH TERRACE  
LAUDERHILL, FL 33319 US

**New Principal Place of Business:**

**Current Mailing Address:**

4551 NW 67TH TERRACE  
LAUDERHILL, FL 33319 US

**New Mailing Address:**

**FEI Number:** 65-0188836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBERTS, LAMONT  
4551 NW 67 TERRACE  
LAUDERHILL, FL 33319 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROBERTS, LAMONT  
Address: 4551 NW 67TH TERRACE  
City-St-Zip: LAUDERHILL, FL 33319

Title: TD ( ) Delete  
Name: KLIGFELD, EDWARD  
Address: 4580 N.W. 67TH TERR.  
City-St-Zip: LAUDERHILL, FL 33319

Title: SD ( ) Delete  
Name: SIMMONS, GLENNIE  
Address: 6721 NW 46TH CRT  
City-St-Zip: LAUDERHILL, FL 33319

Title: VD ( ) Delete  
Name: WATSON, GWENETH  
Address: 6800 NW 45TH COURT  
City-St-Zip: LAUDERHILL, FL 33319

Title: VD ( ) Delete  
Name: ALLEYENE, JUANITA  
Address: 6841 NW 45TH COURT  
City-St-Zip: LAUDERHILL, FL 33319

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD KLIGFELD

TD

03/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date