2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007
Secretary of State

DOCUMENT# N00172

Entity Name: INVERNESS CONDOMINIUM IV ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-2391863 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 W. SR 434, STE. 5000
LONGWOOD, FL 32779 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: TD ( ) Delete
Name: BRAGG, KAY
Address: 2593 COUNTRYSIDE BLVD, #7202
City-St-Zip: CLEARWATER, FL

Title: D ( ) Delete
Name: LE CLAIR, BERNADETTE
Address: 2595 COUNTRYSIDE BLVD #8211
City-St-Zip: CLEARWATER, FL 33761

Title: PD ( ) Delete
Name: GROUNDS, TED
Address: 2593 COUNTRYSIDE BLVD #7213
City-St-Zip: CLEARWATER, FL 33761

Title: VPD ( ) Delete
Name: WILLIAMS, BILL
Address: 2595 COUNTRYSIDE BLVD #8111
City-St-Zip: CLEARWATER, FL 33761

Title: SD ( ) Delete
Name: CONBOY, PAT
Address: 2593 COUNTRYSIDE BLVD #7313
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: MILLS, KATHLEEN
Address: 2595 COUNTRYSIDE BLVD #7201
City-St-Zip: CLEARWATER, FL 33761

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

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

Title: D (X) Change ( ) Addition
Name: WILLIS, WILLIAM
Address: 2595 COUNTRYSIDE BLVD #8101
City-St-Zip: CLEARWATER, FL 33761

I hereby certify that the information supplied with this filing does not qualify for the 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: TED GROUNDS PD 04/13/2007

Electronic Signature of Signing Officer or Director — Date