

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007494

FILED  
Sep 05, 2007  
Secretary of State

**Entity Name:** INVERRARY BOULEVARD PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4448 INVERRARY BL  
LAUDERHILL, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

4448 INVERRARY BL  
LAUDERHILL, FL 33319 US

**New Mailing Address:**

**FEI Number:** 52-2381830 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LOBBAN, NORMAN A TREAS  
4448 INVERRARY BLVD  
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: D ( ) Delete  
Name: RUSSELL, BARRINGTON A D  
Address: 4510 INVERRARY BOULEVARD  
City-St-Zip: LAUDERHILL, FL 33319 US

Title: D ( ) Delete  
Name: LOBBAN, NORMAN A TREAS  
Address: 4448 INVERRARY BOULEVARD  
City-St-Zip: LAUDERHILL, FL 33319 US

Title: D ( ) Delete  
Name: OSBORNE, CORINE D  
Address: 4502 INVERRARY BLVD  
City-St-Zip: LAUDERHILL, FL 33319

Title: PRES ( ) Delete  
Name: MELSON, SHERYL PRES  
Address: 1340 NW 97 AVENUE  
City-St-Zip: LAUDERHILL, FL 33319 US

Title: D ( ) Delete  
Name: WRIGHT, KARLENE VP  
Address: 4432 INVERRARY BLVD  
City-St-Zip: LAUDERHILL, FL 33319 US

**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: NORMAN A LOBBAN

TREA

09/05/2007

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

\_\_\_\_\_  
Date