2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03136

TOWNHOMES OF INVERRARY 32 HOMEOWNERS' ASSOCIATION, INC.



FILED Jun 15, 2006 8:00 am **Secretary of State**

06-15-2006 90001 004 ****61.25

						1000						
Principal Place of Business PRO PROPERTY MGMT 2176 W. OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33311			Mailing Address C/O PRO PROPERTY MGMT 2176 W. OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33311 US						1 8 1 18 1118 117 118			iiii i i iii
2. Principal Place of Business THE Strict			3. Mailing Address 7345 NW 34th Street									
Suite, Apt. #, etc.			Suite, Apt. #, etc.					05152006	Chg-NP	CR2E	E037 (4/06)	
City & State FL			Gity & State FL					4. FEI Numb 59-243			} 	pplied For ot Applicable
Zig 33319 Country USA			^{Zip} 3 <i>331</i>		Country		5. Certificate	of Status Des	sired 🔲	\$8.75 Add Fee Require		
	6. Name	and Address of Current I						7. Name and Address of New Registered Agent				
PRO PROPERTY MANAGEMENT CORP. 2176 W. OAKLAND PARK BLVD. STE. 156 FORT LAUDERDALE, FL 33311						Name Shawn L. Michaelon, Est. Street Address (P.O. Box Number is Not Acceptable) FYOT CD.						
1 / 1 A A						City Plant L'in			FL Zip 29419			
8. The above named entity submits this statement to the porcesse of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
Filing Fee is \$61.25 9. Election					Campaign Financing nd Contribution.			\$5.00 May Added to Fees		Make che Florida Depa	ck payable t artment of S	
10.		OFFICERS AND DIF	RECTORS		11.			ADDITIONS/CH	IANGES TO C	FFICERS AND D	DIRECTORS IN	10
TITLE	PD		7	Delete	TITLE		QY.	<u>a</u> .			Change	☐ Addition
NAME	JONES, R	EGINALD	·				Breeze	NW 34th	c)		.	
STREET ADDRESS	7389 NW	34TH STREET			STREE	T ADDRESS	7351	NW 39th	OE.			
CITY-ST-ZIP	LAUDERH	IILL, FL 33319			CITY-	ST-ZIP		ighill, FL	33319			
TITLE	VD		<u>,</u>	Delete	TiTLE		AD	<u> </u>			Change	☐ Addition
NAME	BROWN, I	BORIS	,	1	NAME		Mau	er Daniel	4		,	
STREET ADDRESS	7351 NW	34TH STREET			STREE	T ADDRESS	7439	1 NW 341	1 00			
CITY-ST-ZIP	LAUDERH	IILL, FL 33319			CITY-:	ST-ZIP	haw	lochill . Pl	353/9		ر	
TITLE	TD		₽.	Delete	TITLE		TD				Change	Addition
NAME	ANDERSO	ON, JEAN	′	1	NAME		Ellist	t, Goria	c/			-
STREET ADDRESS		33RD STREET				T ADDRESS	7490	NO 34th	3 t. 121m			
CITY-ST-ZIP	LAUDERH	IILL, FL 33319			CITY-	ST-ZIP	Lan	dehill, PL	022(1)			
TITLE	SD		Ж	Delete	TITLE		کا	30NJA NU 7514			Change Change	☐ Addition
NAME		I, STEPHANIE		1	NAME		Fuller,	5005A	T 4			
STREET ADDRESS	N	34TH STREET					, יויפבן	1116	1231C			
CITY-ST-ZIP	 	IILL, FL 33319			+	ST-ZIP	have	chill, FL S	3019			
TITLE	D	E1 IZADETU	×	Delete	TITLE						☐ Change	Addition
NAME STREET ADDRESS	1	, ELIZABETH 34TH STREET			NAME		1					
CITY-ST-ZiP	l .	HLL, FL 33319				T ADORESS ST-ZIP						
	LAVOLNI	ncc, (L 303 13		7		O1-EII	-					- La co
NAME			L	Delete	TITLE NAME						Change	☐ Addition
STREET ADDRESS						T ADDRESS						
CITY-ST-ZIP						ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

5-22-06 984-326-6405