FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N07822

(2)

THE INVERRARY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address



LAUDERHILL FL 33319	210 NW 47TH PLACE AUDERHILL FL 33319 IS			
			3. Date Incorporated or Qualified 02/25/1985	3a. Date of Last Report 03/31/1995
2. Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For	
21 4950 N.W. 72 Terr. 26 4749 N.W. 75 HUL)C 59-2500629	Not Applicable
Suife, Apt. #, etc. Suite, Apt. #, etc. 27			5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State 23 Caudenhill FL 28 LAUDER-HILL			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip 23319 Country 219 33319 ShowARD 8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes \[\] No				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
BI Name BRIAN O'MELLI-				
COHEN, ALVIN B2 Story A2 Irpos IR O. Box Number is Not Assentanted				
7210 NW 47TH PL 4950 N.W.				' /cxx.
LAUDERHILL FL 33319				
		84 City	Tarder hi N	FL 85 33319
11. Pursuant to the provisions of Sections \$17,0502 and \$17,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office				
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 aphthrized 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 STOOM W. () Wall				
Signature, typed or printed name of registered agent and title if		E: Registered Agent signature re	agured when reinstating) ADDITIONS/CHANGES TO OFFI	CEDE AND DIDECTORS IN 12
12. OFFICERS AND DIRECT	DELETE	13.	T250511760	Channe
NAME LAWRENCE, LINDA	A	1.2 NAME	MARJORIE STENN	ETTA
STREET ADDRESS 7031 NW 47TH PL		1.3 STREET ADORESS	4749 N.W. 750 Ave	
DITY-ST-ZIP LAUDERHILL FL		1.4 CITY - ST - ZIP	LAUDEZHILL FL	33319
TITLE D	DELETE	2.1 TITLE	SECRETARY	Change Addition
NAME TRASKELL, CHARLES	/\	2.2 NAME	SHARON GBSON	
STREET ADDRESS 7331 NW 35TH CT		2 3 STREET ADDRESS	5210 N.W. 73= Te	w/.
CITY-ST-ZIP LAUDERHILL FL		2 4 CITY-ST-ZIP	LAUDERHILL FL	~`33319
TITLE P	DELETE	3.1 TITLE	VP o	Change Addition
NAME COHEN, ALVIN	•	3.2 NAME	Victor PEDLAS	<i>'</i> `
SIREET ADDRESS 7210 NW 47TH PL		3.3 STREET ADDRESS	17277 N.W. 48 CTV	0
CITY-ST-ZIP LAUDERHILL FL		3 4. CITY-ST-ZIP	LAUDEPHILL FL	_ 33319
TITLE ATD	DELETE	4.1 TITLE	DIRECTOR	Change Addition
NAME RUGGIERO, LORRAINE	-	4. 2 NAME	ANDRES MUNOS.	
STREET ADDRESS 7001 NW 47TH PLACE		4.3 STREET ADDRESS	7285 N.W 490C+	
CITY-ST-ZIP LAUDERHILL FL		4 4 CITY - ST - ZIP	LAUDERHILL P	
TITLE VP	DELETE	51 TITLE	PRESIDENT	Change
NAME ONEILL, BRIAN		52 NAME	1 1-2012000	
STREET ADDRESS 4950 NW 72 TERRACE		5 3 STREET ADDRESS		
CITY-ST-ZIP LAUDERHILL FL	Dotate	5 4 CITY-ST-ZIP		
TITLE	DELETE	6 1 TITLE	DIRECTOR	Change 💢 Addition
			TANA TANA	/ `
NAME		6.2 NAME	KATIE HOFFMAN	
NAME STREET ADDRESS CITY - ST - ZIP		6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - 2IP	KATIE HOFFMAN	ve. L 33319

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 121 phanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/96 954-3