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Apr 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N07822 (2)
1. Corporation Name
THE INVERRARY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 4950 NW 72ND TERR LAUDERHILL FL 33319 US
Mailing Address: 4749 NW 75TH AVE LAUDERHILL FL 33319-3448 US

3. Date Incorporated or Qualified: 02/25/1985
3a. Date of Last Report: 04/03/1996
4. FEI Number: 59-2500629
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
O'NEILL, BRIAN
4950 NW 72ND TERR
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 authorized 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> DELETE
NAME	STENNETT, MARJORIE	
STREET ADDRESS	4749 NW 75TH AVE	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	GIBSON, SHARON	
STREET ADDRESS	5210 NW 73RD TERR	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	PEDLAR, VICTOR	
STREET ADDRESS	7377 NW 48TH CT	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MUNZO, ANDRES	
STREET ADDRESS	7285 NW 49TH CT	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	ONEILL, BRIAN	
STREET ADDRESS	4950 NW 72 TERRACE	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	HOFFMAN, KATIE	
STREET ADDRESS	4451 NW 72ND AVE	
CITY-ST-ZIP	LAUDERHILL FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	CAROL TAFFE - SECRETARY
2.3 STREET ADDRESS	6760 N.W. 47th PL.
2.4 CITY-ST-ZIP	LAUDERHILL FL 33319
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	DIRECTOR GREG JOHNSON
6.3 STREET ADDRESS	7374 N.W. 48th CT.
6.4 CITY-ST-ZIP	LAUDERHILL FL 33319

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if changed, or on an attachment with an address.

SIGNATURE: *Brian O'Neill* DATE: 4/5/97

CRZE037 (9/96)