

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 736239 (5)

1. Corporation Name

PALM BAY CHAPTER #2622 OF AMERICAN ASSOCIATION OF
F RETIRED PERSONS, INC.



Principal Place of Business

Mailing Address

415 NEIGHBORLY CT.
PALM BAY FL 32907
US

415 NEIGHBORLY CT.
PALM BAY FL 32907
US

300001822283
-05/15/96--01047--031

3. Date of Incorporation or Qualified
06/29/1976

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

95-3029898

Applied For

Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

City & State

27

City & State

24

Zip

Country

28

Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MELLERUP, CHARLES
415 NEIGHBORLY CT.
PALM BAY FL 32907

81 Name

Turner, George E.

82 Street Address (P.O. Box Number is Not Acceptable)

1327 ARITON AVE NE.

83

84 City

Palm Bay

FL

85 Zip Code

32907

11. Pursuant to
or register
familiar with

1997 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office
as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am

SIGNATURE

George E. Turner V.P.

SIGNATURE (required with reinstating)

5-8-96

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	NAME	CALDWELL, GERTRUDE	STREET ADDRESS	1029 ZAMORA ST SE	CITY-STATE-ZIP	PALM BAY FL	ET ADDRESS	P	NAME	King, James E	STREET ADDRESS	898 Champion Dr NE	CITY-STATE-ZIP	Palm Bay FL 32905	☐ Change ☐ Addition
TITLE	V	NAME	KING, JAMES E	STREET ADDRESS	898 CHAMPION DRIVE NE	CITY-STATE-ZIP	PALM BAY FL	1.4 CITY-STATE-ZIP	V	NAME	TURNER, George E	STREET ADDRESS	1327 ARITON AVE NE	CITY-STATE-ZIP	Palm Bay, FL 32907	☒ Change ☐ Addition
TITLE	D	NAME	PETER, JANNONE	STREET ADDRESS	P.O. BOX 500497 N/A	CITY-STATE-ZIP	MALABAR FL	2.1 CITY-STATE-ZIP	D	NAME	Jannone, Peter	STREET ADDRESS	P.O. Box 50049 N/A	CITY-STATE-ZIP	Malabara, FL 32950	☒ Change ☐ Addition
TITLE	D	NAME	HETZLER, IRENE	STREET ADDRESS	58 JANUS ROAD	CITY-STATE-ZIP	PALM BAY FL	3.1 CITY-STATE-ZIP	D	NAME	Hetzler Irene	STREET ADDRESS	580 Janus Rd.	CITY-STATE-ZIP	Palm Bay, FL 32907	☒ Change ☐ Addition
TITLE	T	NAME	MELLERUP, CHARLES	STREET ADDRESS	415 NEIGHBORLY COURT	CITY-STATE-ZIP	PALM BAY FL	4.1 CITY-STATE-ZIP	T	NAME	Mellerup, Charles	STREET ADDRESS	415 Neighbor Court	CITY-STATE-ZIP	Palm Bay, FL 32906	☐ Change ☒ Addition
TITLE	S	NAME	BALLENGER, EUGENH	STREET ADDRESS	P.O. BOX 061793 N/A	CITY-STATE-ZIP	PALM BAY FL	5.1 CITY-STATE-ZIP	S	NAME	McIver, Clara	STREET ADDRESS	1659 Avery Rd NE	CITY-STATE-ZIP	Palm Bay, FL 32905	☒ Change ☐ Addition

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 13 if changed, or on an attachment with an address.

SIGNATURE:

Charles W. Mellerup

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/96

Date

407-984-7378

Daytime Phone #

CR2E037 (12/95)