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NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

749755

(5)

**FILED** Mar 15 1996 8:00 am Secretary of State

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THE F	LORIDA	COUNCIL	OF	CHAPTERS	OF	THE	RETIREC	) (
FFICE	rs assi	OCIATION	INC	ORPORATE	D			Ī

Principal Place	e of Business	Mailing Address		L HEBLIK INDIA DININ DINIH INDU BUND	BILL OTHER OLDER EXPERIMENT DIRECTION
3375 ZEPHYR WAY NORTH JACKSONVILLE BEACH FL 32250 US		3375 ZEPHYR WAY NORTH JACKSONVILLE BEACH FL 32250 US			
		03		3. Date Incorporated or Qualified 11/13/1979	3a. Date of Last Report 04/28/1995
<del></del>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2222828	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5 Cortificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	Orty & State		6. Election Campaign Financing	□ \$5.00 May Be
Zip	Country	28		Trust Fund Contribution	Added to Fees
24	25	Zip <b>29</b>	Country	8. This corporation has liability for int	
<u></u>	9. Name and Address of Curre		30	Florida Statutes  10. Name and Address of New Re	Yes No
			81 Name -		gistered Agent
SENKE	., Bernard W.		F	. DONALD TAPPI	N
77 SAB			82 Street Ad 5 3 7 9	dress (P.O. Box Number is Not Acceptable	r
	GORDA FL 33950		83	S Zephyr Way N	ORTH
· Oiiin	CONDA 1 E 00300				
			84 City	5000111 - Basil	85 Zip Code
11. Pursuant or register familiar wi	to the provisions of Sections 617,050; red agent, or both, in the State of Flor th, and accept the philipations of Sec	2 and 617.1508, Florida Statut da Such change was authoriz	tes, the above-named corporated by the corporation's bo	oranger submits this statement for the purporad of directors. I hereby accept the appoin	se of changing its registered office atment as registered agent. I am
SIGNATURE	F. DONALD TAO			$\langle \lambda \rangle$	allandas
OIGHATORE .	Signature, typed or printed name of registered a sil		DRER	rectivition romatating	- 10 MARCA 76
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	SD	DELETE	1.1 TITLE		Change Addition
NAME	Jastremski, richard		1.2 NAME		<u> </u>
STREET ADDRESS	2720 BIRCHWOOD DR		1.3 STREET ADDRESS		
CITY - ST - ZIP	ORANGE PARK FL		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2 1 THTLE		Change Addition
NAME	HAYDEN, ROBERT T COL		2 2 NAME		
STHEET ADDRESS	3715 CONSTANCIA DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	GREEN COVE SPRINGS FL		2 4 CITY - ST - ZIP		
TrTLE	TD	□ D£LETE	3 1 TITLE		Change Addition
NAME	TAPPIN, F. D COL		3.2 NAME		
STREET ADDRESS	3375 ZEPHYR WAY N		3.3 STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE BEACH FL		34 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4 1 THTLE		Change Addition
NAME	NOWLIN, KLYNE D		4 2 NAME		
STREET ADDRESS	440 PORT ROYAL BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	SATELLITE BEACH FL		4 4 CITY - ST - ZIP		
TATLE	D	☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME	PHILLIPS, ROBERT G.		5.2 NAME		
STREET ADDRESS	230 30TH AVE S		53 STREFT ADDRESS		
CITY-ST-ZIP	JACKSONVILLE BEACH FL		5.4 CITY - ST - ZIP		
TITLE	D	DADELETE	6 1 TITLE		☐ Change ☐ Addition
NAME	SWEERS, PETER C JR		6.2 NAME		ļ
STREFT ADDRESS	2599 MERGANSER CT		6.3 STREET ADDRESS		
CHTY-ST-ZIP	TLLHASSEE FL		6 4 CITY - ST - ZIP		
14. Too hereby	certify that the information supplied a	with this filips is uslantavita from	iobad and dage IC	C 11	

Too nereby 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 appears in Block 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 March 1996 904-246-8631