

2000 UNIFORM BUSINESS REPORT (UBR)

3/4/00-90092-015-\$61.25-\$61.25

DOCUMENT # 765556

1. Entity Name

POINCIANA CHAPTER #3520 OF AMERICAN ASSOCIATION

FILED

00 APR -3 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

771 SQUIRREL CT
KISSIMMEE FL 34759
US

771 SQUIRREL CT
KISSIMMEE FL 34759-4312
US

2. Principal Place of Business

3. Mailing Address

307 EDGEWOOD CT

57112

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

POINCIANA, FL

Zip

Country

Zip

Country

34759

POLK

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROUSCH, ROBERT
307 EDGEWOOD CT
KISSIMMEE FL 34759

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Robert W. Rousch

Robert W. Rousch

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	☐ Delete
NAME	MULLEN, DOROTHEA	
STREET ADDRESS	504 CARLSBAD DR	
CITY-ST-ZIP	POINCIANA FL 34758	
TITLE	PRES	☒ Delete
NAME	ROUSCH, ROBERT	
STREET ADDRESS	307 EDGEWOOD CT	
CITY-ST-ZIP	POINCIANA FL	
TITLE	D	☒ Delete
NAME	ROGALSKI, FRANCIS J	
STREET ADDRESS	771 SQUIRREL CT	
CITY-ST-ZIP	POINCIANA FL 34759	
TITLE	VP	☒ Delete
NAME	LOTT, MARGARET	
STREET ADDRESS	639 BROCKTON DR	
CITY-ST-ZIP	KISSIMMEE FL 34758	
TITLE	S	☐ Delete
NAME	BARBARA HOKAUSON	
STREET ADDRESS	718 PAKITE DR	
CITY-ST-ZIP	KISSIMMEE FL 34758	
TITLE	D	☒ Delete
NAME	FIELDS, WINIFRED	
STREET ADDRESS	701 E CADDY LA	
CITY-ST-ZIP	KISSIMMEE FL 34759	

TITLE	D	☐ Change ☒ Addition
NAME	JUNE REED	
STREET ADDRESS	794 DEL PRADO	
CITY-ST-ZIP	POINCIANA FL 34758	
TITLE	PRES.	☒ Change ☐ Addition
NAME	WINIFRED S. FIELDS	
STREET ADDRESS	701 E. CADDY LANE	
CITY-ST-ZIP	POINCIANA FL 34759	
TITLE	T	☐ Change ☒ Addition
NAME	DORIS STEPHENS	
STREET ADDRESS	6 FLAG DR	
CITY-ST-ZIP	POINCIANA FL 34759	
TITLE	VICE PRES	☒ Change ☐ Addition
NAME	MARY DEAL	
STREET ADDRESS	13 FLAG WAY	
CITY-ST-ZIP	POINCIANA FL 34759	
TITLE	D	☐ Change ☒ Addition
NAME	Robert W. Rousch	
STREET ADDRESS	307 EDGEWOOD CT	
CITY-ST-ZIP	POINCIANA FL 34759	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: W. Rousch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-2000

863-422-0619

Date

Daytime Phone #

CR2E037 (9/99)