2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2011
Secretary of State

DOCUMENT# 768254

Entity Name: ALTAMONTE SPRINGS CHAPTER #3578 OF AARP, INC.

Current Principal Place of Business:

727 LITTLE WEKIVA CIRCLE
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

1130 HOBSON ST
LONGWOOD, FL 32750 US

Current Mailing Address:

727 LITTLE WEKIVA CIRCLE
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

1130 HOBSON ST
LONGWOOD, FL 32750 US

FEI Number: 95-3827768 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T
Name: RICHARDSON, KAREN H
Address: 1130 HOBSON ST
City-St-Zip: LONGWOOD, FL 32750

Title: P
Name: MCLEAN, CECILY
Address: 802 RAVENS CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D
Name: SKLENAR, LORETTA
Address: 485 BURNT TREE LANE
City-St-Zip: APOPKA, FL 32712

Title: S
Name: MC DONALD, MONTEZ
Address: 548 E HIGHLAND ST
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: V
Name: BLACKWELL, RUTH
Address: 727 LITTLE WEKIVA CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KAREN H. RICHARDSON T 02/23/2011

Electronic Signature of Signing Officer or Director Date