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Apr 09 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 # 803762 (4)

1. Corporation Name

THE AMERICAN AUTOMOBILE ASSOCIATION (INCORPORATE  
D)



Principal Place of Business

Mailing Address

1000 AAA DRIVE  
HEATHROW FL 32746

1000 AAA DRIVE  
HEATHROW FL 32746-5062

3. Date Incorporated or Qualified  
08/20/1930

3a. Date of Last Report  
04/03/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

53-0025420

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

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

83

84 City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
DARBELNET, ROBERT  
STREET ADDRESS  
1000 AAA DRIVE  
CITY-ST-ZIP  
HEATHROW FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
SRVP  
RINNER, RICHARD D  
STREET ADDRESS  
775 SILVERSMITH  
CITY-ST-ZIP  
LAKE MARY FL 32746

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

1000 AAA Drive  
Heathrow, FL 32746-5063

TITLE ☐ DELETE

NAME  
AS  
SCARFO, HENRY J.  
STREET ADDRESS  
1000 AAA DRIVE  
CITY-ST-ZIP  
HEATHROW FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
VPT  
SCHAFFER, JOHN G  
STREET ADDRESS  
1925 WINGFIELD DRIVE  
CITY-ST-ZIP  
LONGWOOD FL 32779

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
AT  
FRAMPTON, CHARLES L.  
STREET ADDRESS  
1000 AAA DRIVE  
CITY-ST-ZIP  
HEATHROW FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
D  
SMITH, VAN P  
STREET ADDRESS  
1000 AAA DRIVE  
CITY-ST-ZIP  
HEATHROW FL 32746-5063

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

Charles L. Frampton  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date 4/11/97 (407) 444-7317  
Daytime Phone 0013850

CR2E037 (9/96)