

FILED
Apr 14, 2003 8:00 am
Secretary of State
02-12-2003 90105 005 ****70.00

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N02000003394

1. Entity Name

HOLLY HILL CHAPTER OF AARP, INC.

5355
CHAPTER



Principal Place of Business

1000 WALKER ST #328
HOLLY HILL FL 32117

Mailing Address

1000 WALKER ST #328
HOLLY HILL FL 32117

2. Principal Place of Business

3. Mailing Address

POB 250544

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

HOLLY HILL, FL

Zip

Country

Zip

32125-0544 USA

Country

4. FEI Number

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

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

Name
Camille Hulsmann

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

1000 Walker St

Lot 238

City
HOLLY HILL, FL 32117

FL 32117

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Camille Hulsmann

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

(NOTE: Registered Agent signature required when reinstating)

2-7-03

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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
SCHMITT, LOUIS P
POB 731384
ORMOND BEACH FL 32174 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BIGGERS, ROSE E
1502 TUSCALOOSA
HOLLY HILL FL 32117 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
HULSMANN, CAMILLE
1000 WALKER ST #328
HOLLY HILL FL 32117 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
COLBY, JEAN
1000 WALKER ST #328
HOLLY HILL FL 32117 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sec.
Hulsmann, Camille
1000 Walker St # 238
Holly Hill, FL 32117 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treas.
Mary Jane Hayes
1000 Walker St #302
Holly Hill, FL 32117 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-5-03

Date

Daytime Phone #

CR2037 (10/02)