

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

0033908

DOCUMENT # N12334

1. Entity Name

LAKES CHAPTER #3837 OF AMERICAN ASSOCIATION OF R

03-15-2001 90001 030 ****61.25

Principal Place of Business

Mailing Address

MIAMI LAKES COMMUNITY CENTER
 15151 MONTROSE RD
 MIAMI LAKES FL 33014
 US

LAKES CHAPTER AARP
 550 SW 138TH AVE K403
 HOLLYWOOD FL 33027
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Zip

Country

Zip

Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

Not Applicable

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHERRY, FRED A
 6315 GAGE PLACE
 B 309
 MIAMI LAKES FL 33014

Name: **DON COLBERT**
 Street Address (P.O. Box Number is Not Acceptable): **3860 W 2 AVE**
 City: **HIACLEAH** FL Zip Code: **33012**

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: *Donald L Colbert*
 Signature, typed or printed name of registered agent and title if applicable.

DATE: *March 9 Feb 2001*
 DATE

(NOTE: Registered Agent signature required when reinstating)

**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	DP	<input checked="" type="checkbox"/> Delete
NAME	CHERRY, FRED A	
STREET ADDRESS	6315 GAGE PLACE #B309	
CITY-ST-ZIP	MIAMI LAKES FL 33014	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	HENKE, RUTH	
STREET ADDRESS	7791 W 18TH LN	
CITY-ST-ZIP	MIAMI LAKES FL 33014	
TITLE	DS	<input type="checkbox"/> Delete
NAME	FRITCH, ROSEMARY	
STREET ADDRESS	67963 SHARPECROFT COURT	
CITY-ST-ZIP	MIAMI LAKES FL 33014	
TITLE	DT	<input type="checkbox"/> Delete
NAME	FRINK, CLARE	
STREET ADDRESS	550 SW 138TH AVE #K403	
CITY-ST-ZIP	PEMBROKE PINES FL 33027	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	COX, VIRGINIA	
STREET ADDRESS	17321 NW 51 PLACE	
CITY-ST-ZIP	MIAMI FL 33055	
TITLE	D	<input type="checkbox"/> Delete
NAME	FIENE, HELEN	
STREET ADDRESS	6023 EAST 67TH AVENUE	
CITY-ST-ZIP	HIACLEAH FL 33013	

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DON COLBERT	
STREET ADDRESS	3860 W 2 AVE	
CITY-ST-ZIP	HIACLEAH FL 33012	
TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHERRY, FRED A	
STREET ADDRESS	6315 GAGE PLACE #B309	
CITY-ST-ZIP	MIAMI LAKES FL 33014	
TITLE	DS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRITCH ROSEMARY	
STREET ADDRESS	67963 SHARPECROFT CT	
CITY-ST-ZIP	MIAMI LAKES FL 33014	
TITLE	DT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRINK CLARE	
STREET ADDRESS	550 SW 138 AVE #K-403	
CITY-ST-ZIP	PEMBROKE PINES FL 33027	
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARY CAFFARELLI	
STREET ADDRESS	651 E 38 ST	
CITY-ST-ZIP	HIACLEAH FL 33013	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FIENE HELEN	
STREET ADDRESS	6023 E. 67 AVE	
CITY-ST-ZIP	HIACLEAH FL 33013	

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: *Donald L Colbert*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: *March 9-01* (954) 442-7110
 DATE Daytime Phone #

CR2E037 (10/00)