

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N31610 (1)

1. Corporation Name
OAK RUN-OCALA CHAPTER #4374 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.



Principal Place of Business: 8987 SW 108 PL, Ocala FL 34481
Mailing Address: 8987 SW 108 PL, Ocala FL 34481

3. Date Incorporated or Qualified: 04/10/1989
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business: 21 8987 SW 108 PL
2a. Mailing Address: 26 8987 SW 108 PL
22 Suite, Apt. #, etc.
27 Suite, Apt. #, etc.
23 City & State: 23 Ocala, Florida
28 City & State: 28 Ocala, Fla.
24 Zip: 24 34481
25 Country: 25 USA
29 Zip: 29 34481
30 Country: 30 USA

4. FEI Number: 94-3069719
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: MALFA, GRACE P, 8987 SW 108 PL, Ocala FL 34481
10. Name and Address of New Registered Agent: 81 Name: GRACE P. MALFA, 82 Street Address: 8987 SW 108 PL, 83, 84 City: Ocala, FL, 85 Zip Code: 34481

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	PD <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALFA, GRACE P	12 NAME	
STREET ADDRESS	8987 SW 108 PL	13 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34481	14 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEVER, GLORIA	22 NAME	
STREET ADDRESS	10852 SW 87 TER	23 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34481	24 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRUNO, ANTHONY "TONY"	32 NAME	
STREET ADDRESS	8371 S. W. 108TH PLACE	33 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34481	34 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCONNELL, DORIS	42 NAME	
STREET ADDRESS	8650 SW 108 LANE RD	43 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34481	44 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEKITES, DAVID	52 NAME	
STREET ADDRESS	10914 SW 86TH AVENUE	53 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34481	54 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VROOMBOUT, LEO	62 NAME	
STREET ADDRESS	8463 SW 109TH PLACE	63 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34481	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Grace P. Malfa Feb. 20, 1996 352-854-6074

CR2E037 (12/95)