

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 91288 014 \*\*\*\*61.25

**DOCUMENT # P15666**

*FILED  
5/17/01  
MAM*

1. Entity Name  
**AARP INC.**

Principal Place of Business: 601 E. STREET N.W., ATTN: TAX TREASURY & REPORTING, WASHINGTON DC 20049 US  
 Mailing Address: 601 E. STREET N.W., ATTN: TAX TREASURY & REPORTING, WASHINGTON DC 20049 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **SAME AS ABOVE**  
 3. Mailing Address: **SAME AS ABOVE**

Suite, Apt. #, etc. (Blank)

City & State (Blank)

Zip (Blank) Country (Blank)

4. FEI Number: **95-1985500** Applied For:  Not Applicable:

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

6. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent  
 Name: \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable): \_\_\_\_\_  
 City: \_\_\_\_\_ **FL** Zip Code: \_\_\_\_\_

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (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	
TITLE: ED NAME: DEETS, HORACE B STREET ADDRESS: 601 E STREET NW CITY-ST-ZIP: WASHINGTON DC 20049	<input type="checkbox"/> Delete
TITLE: VD NAME: CANJA, ESTHER STREET ADDRESS: 601 E STREET N.W. CITY-ST-ZIP: WASHINGTON DC	<input type="checkbox"/> Delete
TITLE: D NAME: MILLER, ANN STREET ADDRESS: 601 E STREET N.W. CITY-ST-ZIP: WASHINGTON DC	<input checked="" type="checkbox"/> Delete
TITLE: D NAME: TULL, ALLAN W STREET ADDRESS: 601 E STREET N.W. CITY-ST-ZIP: WASHINGTON DC	<input checked="" type="checkbox"/> Delete
TITLE: CFO NAME: DAVIS, JOCELYN S STREET ADDRESS: 601 E STREET NW CITY-ST-ZIP: WASHINGTON DC 20049	<input checked="" type="checkbox"/> Delete
TITLE: TD NAME: HUFF SR, J K STREET ADDRESS: 601 E STREET N.W. CITY-ST-ZIP: WASHINGTON DC	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>SEE ATTACHMENT</b>	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> 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: *M. J. Davis* CFO (INTERIM) Date: *4/19/01* Daytime Phone #: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**AARP**  
**STATE OF FLORIDA OFFICERS AND DIRECTORS**  
**2001**

Name	Title	Address
<b>Officers</b>		
-Ms. Esther Canja	President	601 E Street NW, Washington, D.C. 20049
-Mr. James G. Parkel	President-Elect	601 E Street NW, Washington, D.C. 20049
-Mr. Joseph S. Perkins	Immediate Past Pres.	601 E Street NW, Washington, D.C. 20049
-Mr. J. Kenneth Huff, Sr., CPA	Secretary/Treasurer	601 E Street NW, Washington, D.C. 20049
-Mr. Doug Gledhill	Interim CFO	601 E Street NW, Washington, D.C. 20049
-Mr. Horace B. Deets	Executive Director	601 E Street NW, Washington, D.C. 20049
-Mr. Richard W. Henry	Associate Executive Director	601 E Street NW, Washington, D.C. 20049
<b>Governing Board</b>		
-Ms. Jane O'Dell Baumgarten	Director	601 E Street NW, Washington, D.C. 20049
-Ms. Beatrice S. Braun, M.D.	Board Chair	601 E Street NW, Washington, D.C. 20049
-Mr. C. Keith Campbell	Board Vice Chair	601 E Street NW, Washington, D.C. 20049
-Mr. Otto H. Schultz	Director	601 E Street NW, Washington, D.C. 20049
-Ms. Virginia L. Tierney	Director	601 E Street NW, Washington, D.C. 20049
-Mr. Arnulfo (Art) T. Zamora	Director	601 E Street NW, Washington, D.C. 20049
-Rutherford (Jack) Brice	Director	601 E Street NW, Washington, D.C. 20049
-Mrs. Chris Lamberti	Director	601 E Street NW, Washington, D.C. 20049
-Mr. Charles J. Mendoza, Ph.D.	Director	601 E Street NW, Washington, D.C. 20049
-Mrs. Betty J. Severyn	Director	601 E Street NW, Washington, D.C. 20049
-Rev. Kenneth B. Smith, Sr.	Director	601 E Street NW, Washington, D.C. 20049
-Ms. Marie F. Smith	Director	601 E Street NW, Washington, D.C. 20049
-Ms. Lavada DeSalles	Director	601 E Street NW, Washington, D.C. 20049
-Mr. Douglas C. Holbrook	Director	601 E Street NW, Washington, D.C. 20049
-Mr. Charles Leven	Director	601 E Street NW, Washington, D.C. 20049
-Ms. Mary Jane O'Gara	Director	601 E Street NW, Washington, D.C. 20049
-Mr. Erik Olsen, D.D.S	Director	601 E Street NW, Washington, D.C. 20049

Attachment  
A0067787  
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