

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 763430 (6)

1. Corporation Name

DEERFIELD BEACH CHAPTER #3465 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business

Mailing Address

1224 SE 12TH TERR
PO BOX 495
DEERFIELD BEACH FL 33441

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PO BOX 495
DEERFIELD BEACH FL 33441

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/26/1982 3a. Date of Last Report 05/01/1994

4. FEI Number 95-3731598 Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 1427 E. Hillsboro Blvd.

26 P.O. Box 495

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Apt. #629

27

City & State

City & State

23 Deerfield Beach, FL.

28 Deerfield Beach, FL.

Zip

Country

Zip

Country

24 33441-4214

25 U.S.A.

29 33443

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, MARY E
2383 S.W. 15TH ST.
A85
DEERFIELD BEACH FL 33442

81 Name

SAME

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

200001483652

-05/11/95--01016--001

84 City

***9038.75 ***4630000

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

4/10/1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	SMITH, MARY E
STREET ADDRESS	2383 S.W. 15TH ST., A85
CITY - ST - ZIP	DEERFIELD BCH. FL
TITLE	VD
NAME	MEAD, SHIRLEY
STREET ADDRESS	800 S. OCEAN BLVD., A509
CITY - ST - ZIP	DEERFIELD BEACH FL
TITLE	SD
NAME	SCAPECCHI, ROSE
STREET ADDRESS	2225 S.W. 15TH ST., A228
CITY - ST - ZIP	DEERFIELD BCH FL
TITLE	VD
NAME	FINLEY, ELIZABETH
STREET ADDRESS	1349 S.E. 3RD TERRACE
CITY - ST - ZIP	DEERFIELD BCH FL
TITLE	VD
NAME	HOISINGTON, E. E
STREET ADDRESS	1427 E. HILLSBORO BLVD., A620
CITY - ST - ZIP	DEERFIELD BCH FL
TITLE	VPO
NAME	PENN, EDWARD G
STREET ADDRESS	701 SE 7TH AVE #A12
CITY - ST - ZIP	POMPANO BCH FL

11 TITLE	PD	☒ Change ☐ Addition
12 NAME	HOISINGTON, E.E.	
13 STREET ADDRESS	1427 E. HILLSBORO BLVD., APT. 629	
14 CITY - ST - ZIP	DEERFIELD BCH, FL. 33441	
21 TITLE	VD	☒ Change ☐ Addition
22 NAME	PENN, EDWARD	
23 STREET ADDRESS	23287 BLUE WATER CIRCLE, A405	
24 CITY - ST - ZIP	BOCA RATON, FL. 33433	
31 TITLE	SD	☒ Change ☐ Addition
32 NAME	CLAY, LOLA	
33 STREET ADDRESS	410 N. FEDERAL HWY., A320	
34 CITY - ST - ZIP	DEERFIELD BCH., FL. 33441	
41 TITLE	TD	☐ Change ☐ Addition
42 NAME	FINLEY, ELIZABETH	
43 STREET ADDRESS	1349 S.E. 3RD TERRACE	
44 CITY - ST - ZIP	DEERFIELD CH., FL. 33441	
51 TITLE	VD	☒ Change ☐ Addition
52 NAME	CORCORAN, JOHN	
53 STREET ADDRESS	1523 E. HILLSBORO BLVD., A236	
54 CITY - ST - ZIP	DEERFIELD BCH., FL. 33441	
61 TITLE	VD	☒ Change ☐ Addition
62 NAME	SMITH, MARY E.	
63 STREET ADDRESS	2363 S.W. 15TH ST., A 85	
64 CITY - ST - ZIP	DEERFIELD BCH., FL. 33442	

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 110.07(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 the attachment with an address.

SIGNATURE:

E. E. Hoisington
E. E. Hoisington
President

4/10/95-(305)-421-6704