

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 # **711109** (9)

1. Corporation Name

RAINBOW LAKES CHAPTER #357 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.



Principal Place of Business

**4000 DEEPWATER CT.
DUNNELLON FL 32630-7865**

Mailing Address

**4000 DEEPWATER CT.
DUNNELLON FL 32630-7865**

3. Date Incorporated or Qualified
06/28/1966

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-6196209

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

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

City & State

City & State

23

28

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

Zip

Country

Zip

Country

24

25

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEPHENSON, DALE F
4963 S.W. 196TH AVENUE
DUNNELLON FL 34431**

81 Name **MANDEL ARTHUR G**
82 Street Address (P.O. Box Number is Not Acceptable)
21251 SW PLANTATION
83
84 City **DUNNELLON** FL 85 Zip Code **34431**

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 **MANDEL ARTHUR G (PRES. & D)**

2/3/96

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 **D** ☐ DELETE
NAME **PORTER, PHYLLIS**
STREET ADDRESS **21871 SW CHILLA CT**
CITY-ST-ZIP **DUNNELLA FL 34431**

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE **PD** ☒ DELETE
NAME **STEPHENSON, DALE F**
STREET ADDRESS **4963 SW 196TH AVE.**
CITY-ST-ZIP **DUNNELLON FL 34431**

21 TITLE ☐ Change ☐ Addition
22 NAME **MANDEL ARTHUR G**
23 STREET ADDRESS **21251 S.W. PLANTATION**
24 CITY-ST-ZIP **DUNNELLON, FL. 34431**

TITLE **VD** ☒ DELETE
NAME **KNOBLOCK, LEONARD**
STREET ADDRESS **20685 SW BEACH BLVD.**
CITY-ST-ZIP **DUNNELLON FL**

31 TITLE ☐ Change ☐ Addition
32 NAME **VD BRIND LOUIS**
33 STREET ADDRESS **21184 S.W. HONEYSUCKLE**
34 CITY-ST-ZIP **DUNNELLON FL 34431**

TITLE **TD** ☐ DELETE
NAME **SEIPLE, FORREST H**
STREET ADDRESS **2105 SW PERSIMMON LANE**
CITY-ST-ZIP **DUNNELLON FL**

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE **SD** ☐ DELETE
NAME **IANNOTTI, GLADYS**
STREET ADDRESS **18925 SW 104TH PL**
CITY-ST-ZIP **DUNNELLON FL**

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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: **Seiple Forrest H.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SEIPLE FORREST H

2/3/96 **904-489-4731**
Date Daytime Phone #

CR2E037 (12/95)