

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90033 028 \*\*\*\*61.25

**DOCUMENT # 711109**

1. Entity Name

RAINBOW LAKES CHAPTER #357 OF AARP, INC.



Principal Place of Business

Mailing Address

4000 DEEPWATER CT.  
DUNNELLON FL 34431-3818

4000 DEEPWATER CT.  
DUNNELLON FL 34431-3818



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-6196209

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION FL 33324

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent Signature required when reconstituting)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DT ☐ Delete  
NAME GENTRY, EILEEN  
STREET ADDRESS 3675 S.W. POMPANO  
CITY-ST-ZIP DUNNELLON FL 34431

TITLE DT ☒ Change ☐ Addition  
NAME GENTRY, ROBERT  
STREET ADDRESS 3675 S.W. POMPANO  
CITY-ST-ZIP DUNNELLON, FL 34431

TITLE VD ☐ Delete  
NAME MANDEL, ARTHUR G  
STREET ADDRESS 21251 SW PLANTATION  
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME STEPHENSON, DALE  
STREET ADDRESS 4963 S.W. 196TH AVE.  
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME ROESKI, BONNIE  
STREET ADDRESS 20420 SW RHIN, 130 W LKS BLVD  
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME HILDITCH, IRMA  
STREET ADDRESS 4606 SW CHANNEL HEIGHTS  
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME KNOBLOCK, CATHERINE  
STREET ADDRESS 30685 SW BEACH BLVD  
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Dale F. Stephenson DALE F. STEPHENSON 2-1-06 352-489-1574