


FILE NOW: FILING FEE IS \$61.25

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Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 711425 (9) 1. Corporation Name GREATER PENSACOLA CHAPTER #364 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.			
Principal Place of Business 9852 HILLVIEW RD PENSACOLA FL 32591 US		Mailing Address 992 BROAD ST. PENSACOLA FL 32534	



2. Principal Place of Business 21 1922 E. Fisher St Suite, Apt. #, etc. 22 Pensacola, FL City & State 23 32503 Zip 24 32503		2a. Mailing Address 25 1922 E. Fisher St Suite, Apt. #, etc. 26 Pensacola, FL City & State 27 32503 Zip 28 32503		Country 29 U.S.A. 30 U.S.A.		3. Date Incorporated or Qualified 09/01/1966		4. FEI Number 59-6181592		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required						6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees					
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent WINDSOR, EVA M P.O. BOX 166 9852 HILLVIEW DRIVE PENSACOLA FL 32591				10. Name and Address of New Registered Agent 81 Name Ethel W. Elliott 82 Street Address (P.O. Box Number is Not Acceptable) 1922 E. Fisher St 83 Pensacola 84 City Pensacola FL 85 Zip Code 32503			
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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 Ethel W. Elliott, President Ethel W. Elliott 1-15-98
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		1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WINDSOR, EVA M			1.2 NAME	Ethel W. Elliott		
STREET ADDRESS	P.O. BOX 166 N/A			1.3 STREET ADDRESS	1922 E. Fisher St		
CITY-ST-ZIP	PENSACOLA FL 32591			1.4 CITY-ST-ZIP	Pensacola, FL 32503		
TITLE	V	<input type="checkbox"/> DELETE		2.1 TITLE	V. Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ELLIOTT, ETHEL W.			2.2 NAME	Tempia Morrisette		
STREET ADDRESS	1922 E. FISHER ST.			2.3 STREET ADDRESS	3120 N. 6th Ave		
CITY-ST-ZIP	PENSACOLA FL 32503			2.4 CITY-ST-ZIP	Pensacola, FL 32503		
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WRIGHT, CLAIRE			3.2 NAME			
STREET ADDRESS	7804 NORTHPOINTE BLVD			3.3 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32514			3.4 CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> DELETE		4.1 TITLE	Treas.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JONES, GEORGE			4.2 NAME	Bettye Swanston		
STREET ADDRESS	5520 TRAFALGAR DR			4.3 STREET ADDRESS	4517 Southpointe Ln.		
CITY-ST-ZIP	PENSACOLA FL 32504			4.4 CITY-ST-ZIP	Pensacola, FL 32514		
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LETT, ZOLA			5.2 NAME			
STREET ADDRESS	922 BROAD ST			5.3 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32534			5.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	COLEMAN, IDA Y			6.2 NAME			
STREET ADDRESS	4455 CESSNOCK DR			6.3 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32503			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Ethel W. Elliott 1-15-98 (850) 434-9885

CR2E037 (10/97)