2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2003 8:00 am
Secretary of State
05-01-2003 90213 044 ****61.25

5/:

DOCUMENT # 711590

1. Entity Name

LEON COUNTY CHAPTER #376 OF AARP, INC.

000031B2

Principal Place of Business	Mailing Address
1400 N MONROE ST TALLAHASSEE FL 32303 US	1400 N MONROE ST TALLAHASSEE FL 32303 US

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7150381 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

~~KLOCK, JOSEPH~~
~~240 S BALSAM TERRACE~~
~~TALLAHASSEE FL 32303~~

7. Name and Address of New Registered Agent

Name LUIGI CAMPA

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

4116 ALPINE WAY

City TALLAHASSEE FL Zip Code 32303-2244

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 LUIGI CAMPA Luigi Campa 4-01-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PHIFER, GREGG 1584 MARION AVENUE TALLAHASSEE FL 32303	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY COOK-MS PATTI 707 3RD. ST. APT. G34 HAVANA, FLA. 32333-1439	☒ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KLOCK, JOSEPH 2405 BALSAM TERRACE TALLAHASSEE FL 32303	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT LUIGI CAMPA 4116 ALPINE WAY TALLAHASSEE, FLA 32303-2244	☒ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JONES, HELEN 3127 BROCKTON WAY TALLAHASSEE FL 32312	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER FRENCH, MR. WARREN 1502 JACKSON ST. TALLAHASSEE, FLA 32303-5441	☒ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT STUCKS, MR ALLEN, D. JR. 2414 MEXIA AVE. TALLAHASSEE, FLA. 32304-1521	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: SIGNATURE REQUIRED 4-28-03 850-514-2178
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #