## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#711819** 

FILED Jaņ 15, 2<u>00</u>9 Secretary of State

Entity Name: LAKELAND CHAPTER #200 OF AARP, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

FAITH LUTHERAN CHURCH 211 EASTON DR LAKELAND, FL 33803

**New Mailing Address: Current Mailing Address:** 

6005 SANDRLING DRIVE 214 QUEEN MARY LOOP LAKELAND, FL 33809 US LAKELAND, FL 33805 US

FEI Number: 59-6194167 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AARP CHAPTER 200 AARP CHAPTER 200 6005 SANDERLING DRIVE 214 QUEEN MARY LOOP N/A LAKELAND, FL 33809 US LAKELAND, FL 33805 US

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.

SIGNATURE: FLORENCE LITTLES 01/15/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition WILLARD, CLARENCE LITTLES, FLORENCE Name: Name: 6005 SANDERLING DRIVE Address: 214 QUEEN MARY LOOP Address: City-St-Zip: LAKELAND, FL 33809 US City-St-Zip: LAKELAND, FL 33805 US

Title: SD () Delete Title: () Change () Addition

HALSTEAD, THELMA Name: Name: Address: 4543 HOLDER COURT Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition BURDETTE, CHARLES Name: BURDETTE, CHARLES B Name: 330 W WELLINGTON DRIVE Address: Address: 330 W WELLINGTON DRIVE City-St-Zip: LAKELAND, FL 33805 City-St-Zip: LAKELAND, FL 33813

Title: VΡ () Delete Title: (X) Change ( ) Addition

Name: BARBER, DANIEL Name: WILLARD, CLARENCE 6005 SANDERLING DRIVE Address: 6339 EYRET DR Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES B. BURDETTE TD 01/15/2009