


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2007 8:00 am
Secretary of State

03-15-2007 90029 023 ****61.25

DOCUMENT # 714973
 1. Entity Name
DAYTONA BEACH AREA CHAPTER #386 OF AARP, INC.



Principal Place of Business Mailing Address
 160 NO. BEACH ST. P.O. BOX 1790
 DAYTONA BEACH FL 32115 DAYTONA BEACH FL 32115-1790
 US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **23-7120281**
 Applied For
 Not Applicable

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

Zip Country Zip Country

1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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 PD Delete
 NAME WATTENBARGER, FRANCES
 STREET ADDRESS 5928 CLAYS MILL DR
 CITY-ST-ZIP PORT ORANGE FL 32127

TITLE PD Change Addition
 NAME WYNN, LOWELL H. Florida 32118
 STREET ADDRESS 3043 S. Atlantic Ave., Apt. 1103
 CITY-ST-ZIP DAYTONA Bch. Shores

TITLE VD Delete
 NAME DAVIS, ANNETT
 STREET ADDRESS 907 STONYBROOK CIRCLE
 CITY-ST-ZIP PORT ORANGE FL 32127

TITLE VD Change Addition
 NAME LANDAU, MAX
 STREET ADDRESS 990 Wendham Court
 CITY-ST-ZIP Port Orange, Fla. 32127

TITLE TD Delete
 NAME WYNN, LOWELL
 STREET ADDRESS 3043 SOUTH ATLANTIC AVE., APT. 1103
 CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE SD Change Addition
 NAME LANDAU, DIANE
 STREET ADDRESS 990 Wendham Court
 CITY-ST-ZIP Port Orange, Florida 32127

TITLE SD Delete
 NAME BARBER, NANCY
 STREET ADDRESS 1676 JONES STREET APT. 7
 CITY-ST-ZIP DAYTONA BEACH FL 32119

TITLE TD Change Addition
 NAME BECK, BETTY
 STREET ADDRESS 1302 San Jose Boulevard
 CITY-ST-ZIP Holly Hill, Florida 32117

TITLE D Delete
 NAME GOLDSKY, SHIRLEY
 STREET ADDRESS 1400 S NOVA ROAD APT 387
 CITY-ST-ZIP DAYTONA BEACH FL 32114-5851

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME TERNENT, WILLIAM
 STREET ADDRESS 6467 LONGLAKE DRIVE
 CITY-ST-ZIP PORT ORANGE FL 32128-7190

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: *Lowell H. Wynn* **LOWELL H. WYNN** 2-26-07 386-214-2533
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #