FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717326 (3)

1. Corporation Name

MANATEE COUNTY CHAPTER #75 OF AMERICAN ASSOCIATI ON OF RETIRED PERSONS, INC.

Principal Place of Business	Mailing Address
7222 MEADOW BROOK DR. SARASOTA FL 34243	7222 MEADOW BROOK DR. SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/10/1969
3a. Date of Last Report: 05/01/1994
4. FEI Number: 23-7060615 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

WOOD, MARTHA G.
7222 MEADOW BROOK DRIVE
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	AMBROSE, ANNA	12 NAME	
STREET ADDRESS	2539 FLAMINGO BLVD.	13 STREET ADDRESS	600001483716
CITY-ST-ZIP	BRADENTON FL	14 CITY-ST-ZIP	-05/11/95--01016--001
TITLE	VP	21 TITLE	***9038.75 ****130.00 ☒ Change ☐ Addition
NAME	BROYLES, LOUIS N., JR	22 NAME	VP
STREET ADDRESS	3800 EL CONQUISTADOR 344	23 STREET ADDRESS	LEON TRUMBULL
CITY-ST-ZIP	BRADENTON FL	24 CITY-ST-ZIP	1305 71ST ST NW
TITLE	T	31 TITLE	BRADENTON, FL 34209 ☐ Change ☐ Addition
NAME	ALVERSON, MARION	32 NAME	
STREET ADDRESS	4530 9 ST E.	33 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	34 CITY-ST-ZIP	
TITLE	VP	41 TITLE	P ☒ Change ☐ Addition
NAME	BROWN, MONA	42 NAME	BROWN, MONA
STREET ADDRESS	4701 14TH ST., W., #8	43 STREET ADDRESS	4710 14TH ST W #8
CITY-ST-ZIP	BRADENTON FL	44 CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	P	51 TITLE	D ☒ Change ☐ Addition
NAME	WILSON, THOMAS	52 NAME	WILSON, THOMAS
STREET ADDRESS	1200 AURORA BLVD	53 STREET ADDRESS	1200 AURORA BLVD #128
CITY-ST-ZIP	BRADENTON FL	54 CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	SD	61 TITLE	☐ Change ☐ Addition
NAME	WILSON, FERN	62 NAME	$75/10
STREET ADDRESS	1200 AURORA BLVD	63 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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: Marion T. Alverson Treasurer 3/8/95 (813) 758-3640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date — (Daytime Phone #)

Marion T. Alverson

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