2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 723213 1. Entity Name

SEMINOLE CHAPTER #936 OF AMERICAN ASSOCIATION OF RETIRED PERSON INC

Principal Place of Business C/O KINNEY MARGIE ANN

Mailing Address

C/O KINNEY MARGIE ANN

FILED Mar 22, 2002 8:00 am Secretary of State

03-22-2002 90064 035 ****61.25

CITY-ST-ZIP BELLEAIR BLUFFS FL 33770 CITY-ST-ZIP ST ReTORS Dung R 33709 TITLE SD Change Addition NAME STREET ADDRESS CITY-ST-ZIP LARGO FL 33778 TITLE TD Delete MCCARRON, SHIRLEY STREET ADDRESS CITY-ST-ZIP MCCARRON, SHIRLEY STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33708 CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP SCM: nol2 S-m: nol2 DlvD #14+ Change Addition Delete TITLE TITLE D Delete TITLE TITLE TITLE TITLE D Change Addition	BELLEAIR BLUI US	FFS FL 33770-1331	BELLEAIR BLUFFS FL 33770-1331 US		 	##	II 1 111 111	
City & State Country Country Country Country Country Country State	2. Principal Place of Business		3. Mailing Address					
23-7178005 Not Applicable 28-75 Additional S8-75 Addition S	Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc		DO NOT WRITE IN THIS SPACE		
Security	City & State		Çity a State		4. FEI Number 22-7170/	30E		
S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Street Agoresis (P.O. Box Number is Not Access which is a part of the purpose of changing its registered office or registered agent, or both, in the state of Fiorida. 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 Fiorida. 8. Signature FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. Make Check Payable to Department of State 101. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 THE WPD ADVINOS, SUSAN SISTER ADDRESS 2131 RIDGE RD #62 CITY-S1-ZP LARGO FL 33778 TILE PD Change Addition NAME SIREET ADDRESS CITY-S1-ZP BELLEARI BLUFFS FL 33770 Deale TILE TO Change Addition NAME STREET ADDRESS CITY-S1-ZP LARGO FL 33778 TO Change Addition NAME STREET ADDRESS CITY-S1-ZP LARGO FL 33778 TILE TO Change Addition NAME STREET ADDRESS CITY-S1-ZP LARGO FL 33778 TO Change Addition NAME STREET ADDRESS CITY-S1-ZP LARGO FL 33778 TO Change Addition NAME STREET ADDRESS CITY-S1-ZP LARGO FL 33778 TO Change Addition NAME STREET ADDRESS CITY-S1-ZP LARGO FL 33778 TO Change Addition NAME STREET ADDRESS CITY-S1-ZP SAINT PETERSBURG FL 33708 Deale MACARRON, SHIRLEY STREET ADDRESS CITY-S1-ZP SAINT PETERSBURG FL 33708 Deale MACARRON, SHIRLEY STREET ADDRESS CITY-S1-ZP Change Addition CITY-S1-ZP Change Addition CITY-S1-ZP CHANGE TO STREET ADDRESS CITY-S1-ZP CITY-S1-ZP CHANGE TO STREET ADDRESS CITY-S1-ZP CHANGE TO ADDRESS CITY-S1-ZP		Country	7in	Country		\$9.75 44-		
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8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Fiorida. SIGNATURE Pattern Pattern	131 BLUFFVIEW DR. #105				Street Agaress (P.O. Box Number is Not Acceptable)			
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. S5.00 May Be Added to Fees Make Check Payable to Department of State								
Trust Fund Contribution. Added to Fees Department of State	SIGNATURE							
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I nereby 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.