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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # 723977 (5)

1. Corporation Name

JACKSONVILLE-ARLINGTON CHAPTER #1089 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business	Mailing Address
939 NIGHTINGALE AVE. JACKSONVILLE FL 32216	939 NIGHTINGALE AVE. JACKSONVILLE FL 32216

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/27/1972
3a. Date of Last Report: 05/01/1994
4. FEI Number: 23-7191215 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 1330 Bellemeade Blvd	26 1330 Bellemeade Blvd
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Jacksonville, FL	28 Jacksonville, FL
24 Zip 32211 / 25 Country Duval	29 Zip 32211 / 30 Country Duval

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LONG, SHIRLEY E. 939 NIGHTINGALE AVE. JACKSONVILLE FL 32216	81 Name: Harold Smith 82 Street Address (P.O. Box Number is Not Acceptable): 1330 Bellemeade Blvd 83 84 City: Jacksonville, FL 85 Zip Code: 32211

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 Harold Smith — Signature, typed or printed name of registered agent and title if applicable — Harold Smith — (NOTE: Registered Agent signature required when reinstating) — 3/13/95 (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	KIMAK, WILLIAM	12 NAME	
STREET ADDRESS	560 BAY RIDGE ROAD	13 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32216	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	TURNER, RUTH	22 NAME	
STREET ADDRESS	2524 MITCHELL ROAD	23 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	DWYER, ROSEMARY	32 NAME	
STREET ADDRESS	339 BRUNSWICK	33 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32216	34 CITY-ST-ZIP	
TITLE	P	41 TITLE	☒ Change ☐ Addition
NAME	COX, FRANK B. JR.	42 NAME	P Elmer H. Osteen
STREET ADDRESS	880 MONTEGO RD EAST	43 STREET ADDRESS	1981 Parental Home Road
CITY-ST-ZIP	JACKSONVILLE FL 32216	44 CITY-ST-ZIP	Jacksonville, FL 32216
TITLE	T	51 TITLE	☒ Change ☐ Addition
NAME	LONG, SHIRLEY	52 NAME	T Harold Smith
STREET ADDRESS	939 NIGHTINGLAE RD	53 STREET ADDRESS	1330 Bellemeade Blvd
CITY-ST-ZIP	JACKSONVILLE FL 32216	54 CITY-ST-ZIP	Jacksonville, FL 32211
TITLE	S	61 TITLE	☐ Change ☐ Addition
NAME	JOYNER, IRMA J	62 NAME	
STREET ADDRESS	1981 PARENTAL HONE RD.	63 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32216	64 CITY-ST-ZIP	

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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)(k), 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: Harold Smith — SIGNATURE AND TYPED OR PRINTED NAME OF EXECUTING OFFICER OR DIRECTOR

Harold Smith

3/13/95 (Date) (904) 725-6887 (Daytime Phone #)

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