2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2009
Secretary of State

DOCUMENT# 723977

Entity Name: JACKSONVILLE-ARLINGTON CHAPTER #1089 OF AARP, INC.

Current Principal Place of Business:

1330 BELLEMEADE BV.
JACKSONVILLE, FL 322116013 US

New Principal Place of Business:

10935 INDIES DRIVE NORTH
JACKSONVILLE, FL 322468844 US

Current Mailing Address:

1330 BELLEMEADA BLVD
JACKSONVILLE, FL 322116013 US

New Mailing Address:

10935 INDIES DRIVE NORTH
JACKSONVILLE, FL 322468844 US

FEI Number: 23-7191215 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, HAROLD L
1330 BELLEMEADA BLVD
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

SATTERFIELD, JOSEPHINE J
10935 INDIES DRIVE NORTH
JACKSONVILLE, FL 32246 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: JOSEPHINE SATTERFIELD 03/15/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RAWLING, MARY
Address: 1745 SHERIDAN ST.
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP ( ) Delete
Name: COOKSON, DOREEN
Address: 1649 EL PRADO RD. #1
City-St-Zip: JACKSONVILLE, FL 32216

Title: S ( ) Delete
Name: ANNABELLE, WALLACE
Address: 7400 HOGAN RD APT. 117
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete
Name: SHAFFER, PAULINE
Address: 2103 GLEN GARNER DR.
City-St-Zip: JACKSONVILLE, FL 32246

Title: T ( ) Delete
Name: SMITH, HAROLD
Address: 1330 BELLEMEADE BV.
City-St-Zip: JACKSONVILLE, FL 322116013 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COOKSON, DOREEN
Address: 1649 EL PRADO 1
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP (X) Change ( ) Addition
Name: BALANESI, RALPH
Address: 8995 TROPICAL BEND CIRCLE
City-St-Zip: JACKSONVILLE, FL 32256

Title: S (X) Change ( ) Addition
Name: SELEVER, SHARON
Address: 9838 BAYMEADOWS ROAD 134
City-St-Zip: JACKSONVILLE, FL 32256

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: SATTERFIELD, JOSEPHINE
Address: 10935 INDIES DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 322468844 US

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: JOSEPHINE SATTERFIELD T 03/15/2009
Electronic Signature of Signing Officer or Director Date