

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90020 035 ****61.25

DOCUMENT # 724199

1. Entity Name

ORMOND-BY-THE-SEA CHAPTER 1057 OF AMERICAN
ASSOCIATION OF RETIRED PERSONS, INC.



Principal Place of Business

PRESBYTERIAN CHURCH
105 AMSDEN ROAD
ORMOND BEACH FL 32176
US

Mailing Address

PO BOX 11
ORMOND BEACH FL 32176
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7198222

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HELLER, ART
2625 TULANE AVE
DAYTONA BEACH FL 32118

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 ☐ Delete
NAME BILLIG, PAUL L
STREET ADDRESS 110 DIANNE DRIVE
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME ZIMA, ROBERT
STREET ADDRESS 14 LA PALMA STREET
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SCHWARZ, GENEVIERE
STREET ADDRESS 9 KIM COURT
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SCHWARZ, JARVIS
STREET ADDRESS 9 KIM COURT
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME TIPPINS, DAN
STREET ADDRESS 19 SOCO TRAIL
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE ☒ Change ☐ Addition
NAME Virginia Pearson
STREET ADDRESS 128 Northbrook Ln
CITY-ST-ZIP Ormond Beach, FL 32174

TITLE ☐ Delete
NAME KRAWCHUCK, JEAN
STREET ADDRESS 20 SEA GULL DRIVE
CITY-ST-ZIP ORMOND BEACH FL 32176

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: *Virginia Pearson Treas.* VIRGINIA PEARSON

2-13-06

386-673-5559