2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725887

1. Entity Name

ENGLEWOOD, FLORIDA CHAPTER #1344 OF AARP, INC.



FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90217 026 ****61.25

				NO. WE TO	٧				
Principal Pla	ce of Business	Mailing Address							
ANN TOMLINS 872 EAST 5TH ENGLEWOOD US	son H street	ANN TOMLINSON 872 EAST 5TH STREET ENGLEWOOD FL 34223 US			† ************************************	16 88 1 8 11 8 1 18181 1820 188	. #146/ 046/ 046/ 046/ 04		
	Place of Business So. Ixdiana Ave.	3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & State City & State					4. FEI Number	4. FEI Number 23-7261647		Applied For Not Applicable	
Zip / Country Zip Charlotte			Cou	ntry	5. Certificate of S	5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current F	legistered Agent			7. Name and Ad	dress of New Regi	stered Agent		
				Name		·			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD.				Street Addre	ess (P.O. Box Number is	(P.O. Box Number is Not Acceptable)			
	TON FL 33324				· - •			-(
				City			rL	Code	
the above the obligation	e named entity submits this statement for tions of registered agent.	the purpose of changing its	registere	d office or regi	istered agent, or both, in	n the State of Florida	a. I am familiar v	vith, and acce	pt
SIGNATURE	ANN M. Tom LINSON Signature, typed or printed name of registered agent at		: Registered	M.7	Torului on quired when reinstating)	<u> </u>	DATE		
	FILE NOW: FEE IS \$61.25	9. Election Carr Trust Fund C	ontributio		\$5.00 May Be Added to Fees	Florida	Check Paya Department	of State	
10	OFFICERS AND DIRE	Trust Fund Co	ontributio	on. 🗆		Florida	Department AND DIRECTOR	of State	
10. TITLE	OFFICERS AND DIRE	Trust Fund C	11.	on. 🗆	Added to Fees	Florida	Department	of State	tion (60)
	OFFICERS AND DIRE PD CYPHER, MARGARET	Trust Fund Co	11. TITLE NAME	on.	Added to Fees	Florida	Department AND DIRECTOR	of State	107
10. TITLE NAME	OFFICERS AND DIRE PD CYPHER, MARGARET 9413 GULF STREAM BLVD.	Trust Fund Co	11. TITLE NAME STREE	on. 🗆	Added to Fees	Florida	Department AND DIRECTOR	of State	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD CYPHER, MARGARET	Trust Fund Co	11. TITLE NAME STREE CITY-	T ADDRESS	Added to Fees	Florida	Department AND DIRECTOR Chai	of State S IN 10 Ige ☐ Addi)E037
10. Title Name Street address	OFFICERS AND DIRE PD CYPHER, MARGARET 9413 GULF STREAM BLVD. ENGLEWOOD FL 34224	Trust Fund Co	11. TITLE NAME STREE	ET ADDRESS ST-ZIP	Added to Fees	Florida	Department AND DIRECTOR	of State S IN 10 Ige ☐ Addi)E037
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CYPHER, MARGARET 9413 GULF STREAM BLVD. ENGLEWOOD FL 34224 TTR	Trust Fund Co	11. TITLE NAME STREE CITY- TITLE NAME	ET ADDRESS ST-ZIP	Added to Fees	Florida	Department AND DIRECTOR Chai	of State S IN 10 Ige ☐ Addi)E037
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12. I hereby 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.

SIGNATURE:

SCHOLE IN THE CARLOTTE

2/7/03