	PLEASE READ	ALL INS	TRUCTIONS	S BEFORE C	OMPLET	TING THIS FORM.		
AR	PLICATION	DA DEPARTMENT OF STATE Sandra B. Mortham		AND FILED				
REIN	ISTATEDE VIT	Secretary of State vision of corporations		99 JAN -4 PM 2: 24				
DOCUMENT # 727800					SECRETARY UF STATE FALLAHASSEE, FLORIDA			
1. Corpora Reteres	1. Comporation Name Kissimmer Chapter #87 of American Associ Returned Persons, 1662 PARKGATE DR,					andn		
K1351MMEE, FL. 34746						-		
Principal Place of Business ARP CHRPTER #87 MSSIMMEE GOOD SAMARITAN VILLAGE 1550 ALDERSGATE PRIVE KISSIMMEE, FL., 34746 If above addresses are incorrect in any way, line through incorrect information and enter correction below.								
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, if Applicable 3. New Mailing Office Address, if Applicable					Date Incorporated or Qualified			
ROBERT D. HAINES Suite, Apt. #, etc. Suite, Apt. #.			, etc.		To Do Business in Florida			
2662 City & State	1662 PARISONTE DR. City & State City & State				5. FEI Number Applied For Not Applied be Not Applied For			
<u>KISSI</u> 34741	MMEE, FLORIDA SCHOOL FOLA	Zip	Counti	у	6.	\$8.75	Additional Fee required a Certificate of Status	
	and Street Addresses of Each Officer and/o	or Director (Fig			st 3 directors)			
Title(s) 1	Name of Officers and/or Directors	and/or Directors		Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numb		City / State	/ Zip	
P	ROBERT A HAINES		1662 PAI	PKGATE I	OR	KISSIMMEL FL. 34796		
V.P	FRANCES HAWKES		4115 NORTGATE DR 4		IR 45	KISSIMMEE, FL, 34746		
5	PHYLLIS LEONARD		1383 WESTGATE DR		DR.	KISSIMMEE, FL. 34746		
<u>フ</u>	CHARLES KERN		4192 NORTHGATE I		DR#9	KISSMMEE,FL,	34746	
D	SUSAN KREIDER		3420 NORTHGATZ		OR#4 KISSIMMET FL. 34746		2,34746	
P	W.HOWARD SMITH DAUDREY C. HACKER		1572 WESTGATE TO 4103 MIDDLEGATE		- ' ' '			
8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent			
ROBERT A. HAINES 1662 PARKGATE DR. KISSIMMEE, FL. 34746 Suite, Apt. Letc. Suite, Apt. Letc. Suite, Apt. Letc.							259=5 ORBEGON (188	
CITY NSSIMI						MEE ***12250 3477422.50		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.								
Registered Agent Kobut a. Houses REGISTERED AGENT MUST SIGN Date 12-10-98								
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No No (See other side for information on intangible tax.)								
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.								
IGNATURE: How a Name of Signing Officer or Director Date Dayling Phone #								

of



December 10, 1998

Florida Department of State Division of Corporation P.O. Box 6327 Tallahassee FL 32314

Gentlemen:

We are sorry for the mix up of filing our non-profit organization Corporation Annual Report for 1998.

Our Treasurer died in April, 1998 and as far as we know, or can find out, we have never received the Annual Report Form for the year. Our Chapter does not believe it ever received the corporation form, perhaps gone astray in the mails.

Enclosed is a check for \$122.50 for the completion of our corporation form Thank you for taking care of this matter.

Sincerely,

Robert A. Haines,, President