

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90048 008 ****61.25

0002944

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 728773

1. Corporation Name

INTERLACHEN CHAPTER #1663 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business

% MERLE L. DEROSIA
921 MARION AVE
INTERLACHEN FL 32148
US

Mailing Address

% MERLE L. DEROSIA
P.O. BOX 1011
INTERLACHEN FL 32148
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

02/08/1974

4. FEI Number

75-1013017

Applied For
Not Applicable

5. Certificate of Status Desired ☒ ~

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

DEROSIA, MERLE L.
921 MARION AVE.
INTERLACHEN FL 32148

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Merle L. Derosia - MERLE L. DEROSIA - 2/1/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

T ☐ DELETE

T
NAME DEROSIA, MERLE L
STREET ADDRESS 921 MARION AVE
CITY-ST-ZIP INTERLACHEN FL 32148

P ☐ DELETE

P
NAME ROY, HOWARD
STREET ADDRESS 111 BONNIE AVE
CITY-ST-ZIP INTERLACHEN FL

S ☐ DELETE

S
NAME FRIEB, DELORES
STREET ADDRESS 120 BONNIE AVE.
CITY-ST-ZIP INTERLACHEN FL 32148

D ☐ DELETE

D
NAME CLINTON, BENJAMIN
STREET ADDRESS 305 TROPIC LAGONDA
CITY-ST-ZIP INTERLACHEN FL 32148

D ☐ DELETE

D
NAME NOYES, BILL
STREET ADDRESS 7300 CRILL AVE. #6
CITY-ST-ZIP INTERLACHEN FL 32148

D ☐ DELETE

D
NAME DEROSIA, RICHARD
STREET ADDRESS MARION AVE #921
CITY-ST-ZIP INTERLACHEN FL 32148-1011

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

T
1.2 NAME DEROSIA MERLE L.
1.3 STREET ADDRESS 921 MARION AVE
1.4 CITY-ST-ZIP INTERLACHEN FL. 32148

P ☐ Change ☐ Addition

P
2.1 TITLE ROY HOWARD
2.2 NAME 111 BONNIE AVE
2.3 STREET ADDRESS INTERLACHEN FL. 32148
2.4 CITY-ST-ZIP

S ☐ Change ☐ Addition

S
3.1 TITLE FRIEB DELORES
3.2 NAME 120 BONNIE AVE
3.3 STREET ADDRESS INTERLACHEN FL 32148
3.4 CITY-ST-ZIP

D ☐ Change ☐ Addition

D
4.1 TITLE BENJAMIN CLINTON
4.2 NAME 106 TEMPEST
4.3 STREET ADDRESS INTERLACHEN FL. 32148
4.4 CITY-ST-ZIP

D ☐ Change ☐ Addition

D
5.1 TITLE NOYES, BILL
5.2 NAME 7300 CRILL AVE #6
5.3 STREET ADDRESS PALATKA FL. 32177
5.4 CITY-ST-ZIP

D ☐ Change ☐ Addition

D
6.1 TITLE DEROSIA RICHARD
6.2 NAME 921 MARION AVE
6.3 STREET ADDRESS INTERLACHEN FL 32148
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: *Margaret P. Stake* REQUIRED MARGARET P. STAKE 904 684-2324
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 2/2/99 Daytime Phone #

CR2E037 (11/98)