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Mar 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 729505 (8)			
1. Corporation Name MELBOURNE AIRPORT CHAPTER #1736 OF AMERICANASSOCIATION OF RETIRED PERSONS, INC.			
Principal Place of Business C/O EASTER, LOUISE 1111 HAVEN COURT MELBOURNE FL 32901 US		Mailing Address C/O EASTER, LOUISE 1111 HAVEN COURT MELBOURNE FL 32901-2822 US	
2. Principal Place of Business 21 1205 So. Eddie Allen Rd		2a. Mailing Address 26	
Suite, Apt. #, etc. 22 Melbourne, Fl 32901		Suite, Apt. #, etc. 27	
City & State 23 32901		City & State 28	
Zip 24		Country 25	
Country 29		Country 30	
9. Name and Address of Current Registered Agent EASTER, E. LOUISE 1111 HAVEN COURT MELBOURNE FL 32901			
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 <u>Louise Easter, Secretary</u> Mar. 10, 1997 <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
12. OFFICERS AND DIRECTORS			
TITLE	PD	<input type="checkbox"/> DELETE	
NAME	EASTER, LOUISE		
STREET ADDRESS	1111 HAVEN CT		
CITY - ST - ZIP	MELBOURNE FL		
TITLE	P	<input type="checkbox"/> DELETE	
NAME	GAUVREAU, BETTY ANN		
STREET ADDRESS	1313 HARRY SUTTON RD		
CITY - ST - ZIP	MELBOURNE FL 32901		
TITLE	S	<input type="checkbox"/> DELETE	
NAME	WINKEL, DONNA		
STREET ADDRESS	649 PLUM GROVE		
CITY - ST - ZIP	MELBOURNE FL		
TITLE	T	<input type="checkbox"/> DELETE	
NAME	EASTER, E. LOUISE		
STREET ADDRESS	1111 S HAVEN CT		
CITY - ST - ZIP	MELBOURNE FL 32901		
TITLE	D	<input type="checkbox"/> DELETE	
NAME	THOMAS, MARJORIE		
STREET ADDRESS	615 FLOYD BENNET DR		
CITY - ST - ZIP	MELBOURNE FL		
TITLE	D	<input type="checkbox"/> DELETE	
NAME	STEIN, CATHERINE		
STREET ADDRESS	1160 SLEEPY HOLLOW		
CITY - ST - ZIP	MELBOURNE FL 32901		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12 NAME			
13 STREET ADDRESS			
14 CITY - ST - ZIP			
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
22 NAME			
23 STREET ADDRESS			
24 CITY - ST - ZIP			
31 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
32 NAME	EASTER, LOUISE		
33 STREET ADDRESS	1111 S. Haven Ct		
34 CITY - ST - ZIP	Melbourne, FL		
41 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
42 NAME	EMELDA SMELTZER		
43 STREET ADDRESS	634 PLUMGROVE RD		
44 CITY - ST - ZIP	MELBOURNE, FL		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
52 NAME			
53 STREET ADDRESS			
54 CITY - ST - ZIP			
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
62 NAME			
63 STREET ADDRESS			
64 CITY - ST - ZIP			
14. I do 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. SIGNATURE: <u>Louise Easter</u> Mar. 10, 1997 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0018408			



CR2E037 (9/96)