

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729891

FILED  
Jan 12, 2009  
Secretary of State

**Entity Name:** HAWTHORNE AT LEESBURG CHAPTER #1775 OF AARP, INC.

**Current Principal Place of Business:**

100 HAWTHORNE  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

100 HAWTHORNE BLVD  
LEESBURG, FL 34748 US

**Current Mailing Address:**

100 HAWTHORNE  
LEESBURG, FL 34748 US

**New Mailing Address:**

100 HAWTHORNE BLVD  
LEESBURG, FL 34748 US

**FEI Number:** 23-7366554

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION  
1200 SOUTH PINE ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: ANDREWS, ELIZABETH  
Address: 205 ASPEN CIRCLE  
City-St-Zip: LEESBURG, FL 34748

Title: PD ( ) Delete  
Name: LEVY, MILTON  
Address: 508 PALO VERDE DR  
City-St-Zip: LEESBURG, FL 34748

Title: VP ( ) Delete  
Name: KROICKI, EDWARD  
Address: 115 PYRACANTHA LANE  
City-St-Zip: LEESBURG, FL 34748

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: ANDREWS, ELIZABETH  
Address: 205 ASPEN CIRCLE  
City-St-Zip: LEESBURG, FL 34748

Title: PD (X) Change ( ) Addition  
Name: WEESE, BARBARA  
Address: 141 ASPEN CIRCLE  
City-St-Zip: LEESBURG, FL 34748

Title: VP/D (X) Change ( ) Addition  
Name: SAYLES, DOROTHY  
Address: 116 PALO VERDE DR.  
City-St-Zip: LEESBURG, FL 34748

Title: S ( ) Change (X) Addition  
Name: GRIEBEL, NANCY  
Address: 181 HIBISCUS WAY  
City-St-Zip: LEESBURG, FL 34748

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH ANDREWS

T/D

01/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date