

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Sep 10, 1999 8:00 am
Secretary of State

09-10-1999 90011 031 ****61.25

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Corporation Name

PALM BEACH - LEISUREVILLE CHAPTER #2086 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business

113 SW 8TH PL
BOYNTON BEACH FL 33426
JS

Mailing Address

113 SW 8TH PL
BOYNTON BEACH FL 33426
US

* 6 614332 - 90011 - 31 2 *



1. Principal Place of Business 113 S.W. 8th Place		2a. Mailing Address 113 S.W. 8th Place		3. Date Incorporated or Qualified 04/02/1975	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 23-7433785	
City & State Boynton Beach FL		City & State Boynton Beach, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33426		Zip 33426		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

RICKER, MARY L
113 SW 8TH PLACE
BOYNTON BEACH FL 33426

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

I, 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1	CD COSTELLO, ELEANOR 2003 SW GOLF LANE BOYNTON BEACH FL	13.1	TITLE
12.2	PD VAN BUSKIRK, NORMA 2386 SW 14TH AVE BOYNTON BEACH FL 33426	13.2	NAME
12.3	VD CHIAVOLA, CAROLE 1314 SW 15TH ST BOYNTON BEACH FL 33426	13.3	STREET ADDRESS
12.4	SD DIXON, JANET 820 SW 18TH COURT BOYNTON BEACH FL	13.4	CITY-ST-ZIP
12.5	TD RICKER, MARY L 113 SW 8TH PLACE BOYNTON BEACH FL	13.5	TITLE
12.6		13.6	NAME
12.7		13.7	STREET ADDRESS
12.8		13.8	CITY-ST-ZIP
12.9		13.9	TITLE
12.10		13.10	NAME
12.11		13.11	STREET ADDRESS
12.12		13.12	CITY-ST-ZIP

I, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/99)