

NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90384 016 ****61.25

DOCUMENT # 735612

1. Entity Name

Pine Hills chapter 2518 of
AARP, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

St. Paul's Presbyterian
Church
9600 W. Colonial Dr

3. Mailing Address

9600 W. Colonial Dr

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

953011574

Applied For

Not Applicable

Zip

34761

Country

Zip

34761

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E037B (8/05)

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Rose Mary Broomhall

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

1320 Hernandez Dr

City

Orlando

FL

Zip Code

32808

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended AR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Quinton Roberts 8211 Old Grove Dr Orlando, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V-Pres Blanche Williams 6520 Arundel Dr Orlando, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. Mae Chasteen 5812 Gamble Dr. Orlando, FL 32808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treas Rose Mary Broomhall 1320 Hernandez Dr. Orlando, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ch. Claudia Kenhardt 4881 Cypress woods Dr. Apt 3109 Orlando, FL 32811
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**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Rose Mary Broomhall Rose Mary Broomhall 4/27/06 407-295-1708

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CHAPTER UPDATE FORM ATTACHMENT

REP0032

Chapter Name: Pine Hills

002518

c/o Quinton Roberts, Chapter President

8211 OLD GROVE DR

ORLANDO, FL 32818

EIN Number: 953011574

Check here if your
chapter has no
updates.

☐

MEETING INFORMATION

Meeting Place:

ST PAUL'S PRESBYTERIAN CHURCH

9600 W COLONIAL DR

OCOE, FL 34761

Meeting Time: 01:00PM

Meeting Days: FIRST THURSDAY

Contact Phone*: (407)294-9421

Wheelchair Access?: Yes or No

Months Closed: JUL,AUG

Please Print Changes Below

***NOTE:** The contact phone number will be provided to national members.

OFFICER INFORMATION

Chapter President:

Volunteer ID No.: 04-028-2469

Quinton Roberts

8211 OLD GROVE DR

ORLANDO, FL 32818

(407)294-9421

E-mail:

Please Print Changes Below

Chapter Vice President:

Volunteer ID No.: 00-154-9997

Blanche Williams

6520 ARUNDEL DR

ORLANDO, FL 32818

(407)293-0389

E-mail: remawms@aol.com

CHAPTER UPDATE FORM

ATTACHMENT

Chapter No.: 002518

Chapter Secretary:

Volunteer ID No.: 04-072-1276

Mae Chasteen

5812 GAMBLE DR

ORLANDO, FL 32808

(407)291-6746

E-mail:

40056961
#735612**Please Print Changes Below****Chapter Treasurer:**

Volunteer ID No.: 04-059-3261

Rose Broomhall

1320 HERNANDES DR

ORLANDO, FL 32808

(407)295-1708

E-mail:

Health Care Committee Chairman:

Volunteer ID No.: 00-175-9968

HARRIET BEAULIEU

4916 ELI ST

ORLANDO, FL 32804

(407)644-6163

E-mail:

Harriet Resigned
due To Illness-Has not Been
Replaced**Legislative Committee Chairman:**

Volunteer ID No.: 50-003-4992

Claudia Lenhardt

4881 CYPRESS WOODS DR APT 3109

ORLANDO, FL 32811

(407)540-0780

E-mail: