2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#735612

FILED Feb 04, 2009 Secretary of State

Entity Name: PINE HILLS CHAPTER #2518 OF AARP, INC.

Current Principal Place of Business: New Principal Place of Business: 9600 WEST COLONIAL DR OCOEE, FL 34761 **Current Mailing Address: New Mailing Address:** 1320 HERNANDES DRIVE ORLANDO, FL 32808 FEI Number: 95-3011574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROOMHALL, ROSE MARY CHURAMAN, FRANK 1320 HERNANDES DR 1332 HUNTERMAN LANE ORLANDO, FL 32808 WINTER GARDEN, FL 34787 US 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: FRANK CHURAMAN 02/04/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VΡ () Change () Addition () Delete ROBERTS, QUINTON Name: Name: 8211 GROVE DR Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CHASTEEN, MAE Name: Address: 5812 GAMBLE DR Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: Title: () Delete Title: () Change () Addition LAWRIE, CHARLES Name: Name: #313 COVER BRIDGE DR #D Address: Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip: () Delete Title: Title: (X) Change () Addition Name: BROOMHALL, ROSE M Name: CHURAMAN, FRANK 1320 HERNANDEZ DR 1332 HUNTERMAN LANE Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: () Change () Addition ROBERTS, GRACE Name: Name: 8211 GROVE DR Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: HCCC () Delete Title: () Change () Addition BEAULIEU, HARRIET Name: Name: Address: 4916 ELI ST Address: ORLANDO, FL 32804 City-St-Zip: City-St-Zip:

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: FRANK CHURAMAN MR 02/04/2009