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Feb 27 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 # 735616 (5)

1. Corporation Name

JACKSONVILLE-HIGHLANDS CHAPTER #2467 OF AMERICAN
ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business

Mailing Address

10415 MONACO DRIVE #6
JACKSONVILLE FL 32218-5473

10415 MONACO DRIVE #6
JACKSONVILLE FL 32218-5473



3. Date Incorporated or Qualified
04/20/1976

3a. Date of Last Report
03/29/1996

4. FEI Number
95-3006958

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERGMAN, ELMERITA
10415 MONACO DRIVE #6
JACKSONVILLE FL 32218

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

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

TITLE P ☒ DELETE
NAME BOSTER, GEORGE
STREET ADDRESS 3404 TROUT RIVE BLVD
CITY-ST-ZIP JACKSONVILLE FL

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME KIMBROUGH, VIRGINIA
1.3 STREET ADDRESS 10531 RUGERS ROAD
1.4 CITY-ST-ZIP JACKSONVILLE, FL 32218

TITLE V ☒ DELETE
NAME KIMBROUGH, VIRGINIA
STREET ADDRESS 10531 RUGERS ROAD
CITY-ST-ZIP JACKSONVILLE FL

2.1 TITLE V ☒ Change ☐ Addition
2.2 NAME BOSTER, GEORGE
2.3 STREET ADDRESS 3404 TROUT RIVER BLVD
2.4 CITY-ST-ZIP JACKSONVILLE, FL 32208

TITLE S ☐ DELETE
NAME SMART, MARY
STREET ADDRESS 1641 WOFFARD STREET.
CITY-ST-ZIP JACKSONVILLE FL 42218

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME DOBBIN, CALVIN
3.3 STREET ADDRESS 11475 AMERCANA LANE
3.4 CITY-ST-ZIP JACKSONVILLE, FL. 32218

TITLE T ☐ DELETE
NAME BERGMAN, ELMERITA
STREET ADDRESS 10415 MONACO DRIVE #6
CITY-ST-ZIP JACKSONVILLE FL 32218-5473

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME WILLHELM, RUBY
4.3 STREET ADDRESS 1327 GAILWOOD CIRCLE, N.
4.4 CITY-ST-ZIP JACKSONVILLE, FL. 32218

TITLE D ☐ DELETE
NAME HOLMES, RANDALL
STREET ADDRESS 10968 WINGATE ROAD
CITY-ST-ZIP JACKSONVILLE FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME KILMER, JOSEPH
STREET ADDRESS 3093 LANNIE ROAD
CITY-ST-ZIP JACKSONVILLE FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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:

Elmerita Bergman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 20 1997

Date

Daytime Phone 4006757

CR2E037 (9/96)