

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 03, 2007 8:00 am**  
**Secretary of State**

04-03-2007 90011 023 \*\*\*\*\*61.25

**DOCUMENT # 736239**

1. Entity Name

PALM BAY CHAPTER #2622 OF AARP, INC.



Principal Place of Business

Mailing Address

PALM BAY COMMUNITY CENTER  
AT POINT MALABAR BLVD.  
PALM BAY FL 32905  
US

1860 EVA LANE  
MALABAR FL 32950  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

95-3029898

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PABLO, AMBAT  
1860 EVA LN  
MALABAR FL 32950

Name

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

City

**FL**

Zip Code

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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☐ Delete  
NAME AMBAT, PABLO  
STREET ADDRESS 1860 EVA LANE  
CITY-ST-ZIP MALABAR FL 32905

☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

S ☒ Delete  
NAME LEIGH, BARBARA  
STREET ADDRESS 2511 PINEHURST CIR  
CITY-ST-ZIP MELBOURNE FL 32908

☒ Change ☐ Addition  
NAME ANNE SANDUIC  
STREET ADDRESS 1616 MALABAR LAKES DR. N.E.  
CITY-ST-ZIP PALM BAY, FL 32905

D ☐ Delete  
NAME KING, JIM  
STREET ADDRESS 1154 PNE CREEK CIRCLE NE  
CITY-ST-ZIP PALM BAY FL 32905

☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VP ☒ Delete  
NAME BUNCHE, ZOLA  
STREET ADDRESS 1078 ALTAMIRA ST NW  
CITY-ST-ZIP PALM BAY FL 32909

☒ Change ☐ Addition  
NAME MARTHA WALTERS  
STREET ADDRESS 814 STARLOND ST. SE.  
CITY-ST-ZIP PALM BAY, FL 32909

P ☒ Delete  
NAME WHITEMAN, JESSIE  
STREET ADDRESS 1502 EAGLE AVENUE NW  
CITY-ST-ZIP PALM BAY FL 32907

☒ Change ☐ Addition  
NAME ZOLA M. BUNCHE  
STREET ADDRESS 1078 ALTAMIRA ST. N.W.  
CITY-ST-ZIP PALM BAY, FL 32907

2VP ☒ Delete  
NAME BASKIN, GRACE  
STREET ADDRESS PO BOX 100484  
CITY-ST-ZIP PALM BAY FL 33910

☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Zola m. Bunche - Zola m. Bunche 3-19-07 - 953-5821 (321)