2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State
02-20-2002 90039 033 ****61.25

DOCUMENT # 758203

1. Entity Name

HIGH SPRINGS CHAPTER #3373 OF AMERICAN ASSOCIATI ON OF RETIRED PERSONS, INC.

Principal Place of Business	Mailing Address
10 N.E. 2ND AVE. HIGH SPRINGS FL 32643 US	29304 N.W. 182ND TERR ALACHUA FL 32615 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	MARY ANN EVANOFF 1030 S.E. Cherry St.
City & State	High Springs, FL.
Zip / Country	32643 / Alachua

4. FEI Number 95-3656204 ☐ 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
EVANOFF, MARY ANN 1030 SE CHERRY ST. HIGH SPRINGS FL 32643	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.

SIGNATURE Mary Ann Evanoff — Feb. 04, 2002
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

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T EVANOFF, MARY A 1030 SE CHERRY ST HIGH SPRINGS FL 32643	☐ Delete	MARY ANN EVANOFF	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD POPE, HAROLD 819 SE 60 AVE TRENTON FL 32693	☒ Delete	PD ~~tot~~ Kemp, Wanda 8660 N.E. 50th St. High Springs, FL. 32643	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BENTHALL, JANET 17919 NW 266 ST HIGH SPRINGS FL 32643	☒ Delete	U PD Johnson, Juanita 405 N.W. 5th Ave. High Springs, FL. 32643	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CHADWICH, TERESA PO BOX 265 FORT WHITE FL 32038	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary Ann Evanoff Treasurer — 2-04-2002 — (386) 454-0329
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #