

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760430 (9)

1. Corporation Name

SAN JOSE-JACKSONVILLE CHAPTER #3350 OF AMERICAN
ASSOCIATION OF RETIRED PERSONS, INC.



Principal Place of Business

Mailing Address

4116 PEACHTREE CIR E
JACKSONVILLE FL 32207

4116 PEACHTREE CIR E
JACKSONVILLE FL 32207

3. Date Incorporated or Qualified
10/15/1981

3a. Date of Last Report
03/15/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
95-3636647

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AVCHIN, HELEN C
4116 PEACHTREE CIR E
JACKSONVILLE FL 32207

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 617.1506, 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 617.0103, Florida Statutes.

SIGNATURE

Helen C. Avchin

(NOTE: Registered Agent signature required when reinstating)

2/26/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ~~TO~~ DIRECTOR ☐ DELETE
NAME GOLDBERG, ALFRED
STREET ADDRESS 2705 WOODHILL DR.
CITY-ST-ZIP JACKSONVILLE

1.1 TITLE Secretary; Director ☐ Change ☒ Addition
1.2 NAME Flowers, Babette
1.3 STREET ADDRESS 8010 Hollyridge Rd.
1.4 CITY-ST-ZIP Jacksonville, FL 32256 ☐ Change ☒ Addition

TITLE SD ☒ DELETE
NAME SHENKMAN, DOROTHY
STREET ADDRESS 9645 BAYMEADOWS RD. #605
CITY-ST-ZIP JACKSONVILLE FL

2.1 TITLE Director ☐ Change ☒ Addition
2.2 NAME Detzel, Patricia
2.3 STREET ADDRESS 3465 Philips Hwy #223
2.4 CITY-ST-ZIP Jacksonville, FL 32207 ☐ Change ☒ Addition

TITLE D ☐ DELETE
NAME GLASSER, ESTHER
STREET ADDRESS 5846 MT. CARMEL TERR. #1101
CITY-ST-ZIP JACKSONVILLE FL

3.1 TITLE Treasurer, Director ☐ Change ☒ Addition
3.2 NAME Lamb, Vlasta S.
3.3 STREET ADDRESS 4327 Plaza Gate Lane #101
3.4 CITY-ST-ZIP Jacksonville, FL 32217 ☐ Change ☐ Addition

TITLE P ☐ DELETE
NAME AVCHIN, HELEN
STREET ADDRESS 4116 PEACHTREE CIR EAST
CITY-ST-ZIP JACKSONVILLE FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME WEINBERG JEAN
STREET ADDRESS 1761 ORLANDO CIRCLE S.
CITY-ST-ZIP JACKSONVILLE FL

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

TITLE SD ☒ DELETE
NAME KAPLAN, VIVIAN
STREET ADDRESS 846 IBIS RD.
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)