


FILE NOW: FILING FEE IS \$61.25

FILED

Mar 05 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **763431** (4)  
 1. Corporation Name  
**LAKE WALES CHAPTER #3416 OF AMERICAN ASSOCIATION  
 OF RETIRED PERSONS, INC.**



Principal Place of Business <b>% ARPINO                  386 CANAL COURT                  LAKES WALES FL 33853</b>	Mailing Address <b>% ARPINO                  386 CANAL COURT                  LAKES WALES FL 33853</b>
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2. Principal Place of Business <b>21 % HUNT                  Suite, Apt. #, etc.  <b>22 900 REDWOOD WAY                  City &amp; State  <b>23 LAKE WALES FL                  Zip Country  <b>24 33853 25 POLK</b> </b> </b></b>	2a. Mailing Address <b>26 % HUNT                  Suite, Apt. #, etc.  <b>27 900 REDWOOD WAY                  City &amp; State  <b>28 LAKE WALES FL                  Zip Country  <b>29 33853 30 POLK</b> </b> </b></b>
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3. Date Incorporated or Qualified <b>05/25/1982</b>	
4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>ARPINO, NICK                  386 CANAL COURT                  LAKE WALES FL 33853</b>	10. Name and Address of New Registered Agent <table border="1"> <tr> <td>81 Name  <b>MOORE, MILDRED A</b> </td> </tr> <tr> <td>82 Street Address (P.O. Box Number is Not Acceptable)  <b>225 LAKESHORE DR N</b> </td> </tr> <tr> <td>83                 </td> </tr> <tr> <td>84 City  <b>LAKE WALES</b> </td> <td>85 Zip Code  <b>FL 33853</b> </td> </tr> </table>	81 Name <b>MOORE, MILDRED A</b>	82 Street Address (P.O. Box Number is Not Acceptable) <b>225 LAKESHORE DR N</b>	83	84 City <b>LAKE WALES</b>	85 Zip Code <b>FL 33853</b>
81 Name <b>MOORE, MILDRED A</b>						
82 Street Address (P.O. Box Number is Not Acceptable) <b>225 LAKESHORE DR N</b>						
83						
84 City <b>LAKE WALES</b>	85 Zip Code <b>FL 33853</b>					

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 **Mildred A Moore** **Mildred A Moore** **2-27-98**  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relistening) DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD                  HUNT, LOIS J                  900 REDWOOD WAY                  LAKE WALES FL 33853</b> <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD                  BECKER, SHARON                  2730 LAKE PIERCE DR                  LAKE WALES FL</b> <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD                  BOWMAN, RAYMOND C                  5111 SADDLEBAG LAKE RD                  LAKE WALES FL</b> <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>RSD                  MOORE, MILDRED A                  225 LAKESHORE DR N                  LAKE WALES FL</b> <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D                  ARPINO, NICK                  386 CANAL COURT                  LAKE WALES FL 33853</b> <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D                  LABONTE, ELEANOR                  1101 ST. ANNE SNRINE RD.                  LAKE WALES FL 33853</b> <input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>VD                  BECKER, HUBERT E                  2730 LAKE PIERCE DR                  LAKE WALES FL 33853</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<b>RSD                  BECKER, SHARON                  2730 LAKE PIERCE DR                  LAKE WALES FL 33853</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<b>D                  MIKULA, EDWARD W.                  527 SUNSHINE DR                  LAKE WALES FL 33853</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. 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 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 **Lois J Hunt** **Lois J Hunt** **2/26/98**

CR2E037 (1097)