

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 765362

1. Entity Name

OKALOOSA COUNTY CHAPTER #3493 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business

Mailing Address

4034 DRIFTING SAND TRAIL
DESTIN FL 32541
US

28 CHELSEA DR. N.W.
FT. WALTON BCH FL 32547
US

2. Principal Place of Business

3. Mailing Address

SAME AS ABOVE

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

32541

USA

32541

USA

6. Name and Address of Current Registered Agent

4. FEI Number

95-3764605

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

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

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 P
NAME AMARO, JEAN
STREET ADDRESS 4034 DRIFTING SAND TRAIL
CITY-ST-ZIP DESTIN FL 32541

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME DILLON, ETHEL
STREET ADDRESS 301 BRIAN CIRCLE
CITY-ST-ZIP MARY ESTHER FL 32569

TITLE VICE PRESIDENT
NAME EUGENE STEVENSON
STREET ADDRESS 2243 COLONIAL AVE.
CITY-ST-ZIP NAVARRE FL 32566

TITLE T
NAME HOLLAND, THERESA
STREET ADDRESS 28 CHELSEA DR NW
CITY-ST-ZIP FT WALTON BEACH FL 32549

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE RS
NAME THORNBURG, ARTHUR
STREET ADDRESS 35 E CASA LOMA DR
CITY-ST-ZIP MARY ESTHER FL 32569

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME CAWRSE, AL
STREET ADDRESS 79 CREST PLACE
CITY-ST-ZIP DESTIN FL 32541

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME HOLLAND, HAL D
STREET ADDRESS 28 CHELSEA DR NW
CITY-ST-ZIP FT WALTON BCH FL 32547

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Signature and typed or printed name of signing officer or director: *Theresa Holland (T)* 8 April 2002 850-862-2309

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90339 018 ****61.25

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DO NOT WRITE IN THIS SPACE

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