FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # Poinciana Chapter # 3520 of AARP, Inc 765556

FILED May 06 1997 8:00am Secretary of State

**#661.25 3. Date Incorporated or Qualified O. C.T. 3.6 79.02 19.00 19.	Principal Place of	Business	Mailing Address		-05/13/970105	15515 (1015
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Country Zip Country Zip Country Zip Country B. This corporation has liability for managible lay under s. 199.032, proof a Statute Yes Ye	23		28	í .	1	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent		Country		Country		
Section Sect	24	25	29	30		
Pursuant to the provisions of Socions 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing list regisfered office or registered agont, or both, in the State of Florida. Such change was authorized by the proposed of directors. Thereby accept the obligation of Socions 617.0502 and 617.1508. Florida Statutes. The above-named corporation submits this statement for the purpose of changing list regisfered office or registered agont. I am First risk with an advected the obligation of Socions 617.0503. given Statutes. The proposed of directors. Thereby accept the elapsochament as registered agont 1 am First risk with a dealer of the purpose of changing list regisfered agont 1 am First risk with a dealer of the purpose of changing list regisfered agont 1 am First risk with a dealer of the complete of the co		Name and Address of Curr	ent Registered Agent		10. Name and Address of New Reg	stered Agent
Second Address (P.O. Box Number is Not Acceptable)					INCIS ROGALSKI	<i>,</i> i
11. Pursuant to the previsions of Soctions 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing life regisfered office or registered agont, or both, in the State of Florida. Such change was authorized by the compensation of directors. I hereby accept the appointment as registered agont of amount of 17,650. Per Statutes. SIGNATURE				82 Street A	ddress (P.O. Box Number is Not Acceptable	e)
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing dist repisfered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits his statement for the purpose of changing dist repisfered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits his statement for the purpose of changing dist repisfered office or registered agent. I am a statement for the purpose of changing distributes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. The purpose of the application of Section 617,0503 before the application of Section 13 in 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. STREET ADDRESS 77 J SQUIPLE IN 11 IN 12 10. DELETE 11 TITLE	•			77/	SQUIRREL CT.	
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FRANCIS ROGALENI 4-37-97 941-427-0739