

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90050 023 ****61.25

DOCUMENT # 766022

1. Entity Name

MANDARIN CHAPTER #3532 OF AARP, INC.



Principal Place of Business

3128 CORMORANT DR.
JACKSONVILLE FL 32223
US

Mailing Address

3128 CORMORANT DR.
JACKSONVILLE FL 32223
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-3781647

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

TAYLOR, JAMES-H.
~~1228 CORMORANT DRIVE~~
~~PLANTATION FL 33324~~

Name
(Name in Block 6 is correct)

Street Address (P.O. Box Number is Not Acceptable)
3128 Cormorant Drive

City

Jacksonville,

FL

Zip Code
32223

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BRADLEY, MARTIN	
STREET ADDRESS	10547 FOX SQUIRREL LANE	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MULLEN, ELLIE	
STREET ADDRESS	1501-WOODHILL PLACE	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ALEXANDER, CATHERINE W	
STREET ADDRESS	9520 PICKWICK DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	D	<input type="checkbox"/> Delete
NAME	FITZPATRICK, ROBERT	
STREET ADDRESS	11554 BASKERVILLE ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE	D	<input type="checkbox"/> Delete
NAME	TAYLOR, JAMES H	
STREET ADDRESS	3128 CORMORANT DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BICKERTON, PEGGY	
STREET ADDRESS	12507 MUSCOVY DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32223	

TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCUDDER, FRANK	
STREET ADDRESS	12507 MUSCOVY DRIVE	
CITY-ST-ZIP	JACKSONVILLE, FL 32223	
TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALEXANDER, ROBERT B.	
STREET ADDRESS	9520 PICKWICK DRIVE	
CITY-ST-ZIP	JACKSONVILLE, FL 32257	
TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALEXANDER, CATHERINE W.	
STREET ADDRESS	9520 PICKWICK DRIVE	
CITY-ST-ZIP	JACKSONVILLE, FL 32257	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRADLEY, MARIAN	
STREET ADDRESS	10547 FOX SQUIRREL LANE	
CITY-ST-ZIP	JACKSONVILLE, FL 32257	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *Robert B. Alexander* Robert B. Alexander April 8, 2004 (904) 733-0516

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment
24039288

The following is a continuation of Block 10, Document # 766022,
dated April 8, 2004 (Mandarin Chapter #3532 of AARP, Inc.).

D
HOLT, MILO
9439 SAN JOSE BLVD. #184
JACKSONVILLE, FL 32257

D
LINGEL, REGINA
11077 WANDERING OAKS DRIVE
JACKSONVILLE, FL 32257

D
SCUDDER, ANNE
12507 MUSCOVY DRIVE
JACKSONVILLE, FL 32223

D
YOUNG, MILDRED
3920 WINDRIDGE COURT
JACKSONVILLE, FL 32257

Robert B. Alexander

ROBERT B. ALEXANDER, TREASURER/DIRECTOR
MANDARIN CHAPTER # 3532 OF AARP, INC.

APRIL 8, 2004