

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766022

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** MANDARIN CHAPTER #3532 OF AARP, INC.

**Current Principal Place of Business:**

10547 FOX SQUIRREL LN  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

10547 FOX SQUIRREL LN  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

9520 PICKWICK DRIVE  
JACKSONVILLE, FL 32257 US

**FEI Number:** 95-3781647

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** VD  
**Name:** ALEXANDER, CATHY W VD  
**Address:** 9520 PICKWICK DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32257 US

**Title:** D  
**Name:** TAYLOR, ELLIE M D  
**Address:** 6707 WHITE BLOSSOM CIRCLE  
**City-St-Zip:** JACKSONVILLE, FL 32258 US

**Title:** D  
**Name:** RESNIKOFF, SONDR A D  
**Address:** 11598 LAZY WILLOW LANE  
**City-St-Zip:** JACKSONVILLE, FL 32223 US

**Title:** SD  
**Name:** PRESSON, BETTY SD  
**Address:** 3933 PRITMORE ROAD, #134  
**City-St-Zip:** JACKSONVILLE, FL 32257 US

**Title:** TD  
**Name:** ALEXANDER, ROBERT B TD  
**Address:** 9520 PICKWICK DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32257 US

**Title:** PDC  
**Name:** BRADLEY, MARIAN PDC  
**Address:** 10547 FOX SQUIRREL LANE  
**City-St-Zip:** JACKSONVILLE, FL 32257 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** ROBERT B. ALEXANDER

TREA

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date