

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766022

FILED
Mar 08, 2012
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:

9520 PICKWICK DRIVE
JACKSONVILLE, FL 32257 US

New Mailing Address:

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: D
Name: COLSEN, ALICE D
Address: 12405 MACAW DRIVE
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: D
Name: SCUDDER, FRANK D
Address: 12507 MUSCOVY DRIVE
City-St-Zip: JACKSONVILLE, FL 32223 US

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

Title: D/S
Name: PRESSON, BETTY D/S
Address: 4263 LOSCO ROAD, #814
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

T/D

03/08/2012

Electronic Signature of Signing Officer or Director

Date