


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90866 023 ****61.25

DOCUMENT # 766360		
1. Entity Name FORT CAROLINE CHAPTER #3545 OF AARP, INC.		

60046154



04272007 Chg-NP CR2E037 (12/06)

Principal Place of Business C/O FT CAROLINE METH CHURCH 8510 FT CAROLINE RD. JACKSONVILLE, FL 32270 US		Mailing Address 8510 FT. CAROLINE RD. JACKSONVILLE, FL 32277	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 95-3789941	Applied For <input type="checkbox"/> Not Applicable
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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	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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. 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

Filing Fee is \$61.25
Due by May 1, 2007

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 NAME STREET ADDRESS CITY-ST-ZIP	VPD RIDLEY, YVETTE 8481 CONCORD BLVD. JACKSONVILLE, FL 32208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MACINNES, AUDREY 4828 BEACON DRIVE WEST JACKSONVILLE, FL 32225 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Ellie Connelly 5353 Arlington Expway, #125 Jacksonville, FL 32211 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GATEWOOD, MARJORIE 6011 PEELER RD. S. JACKSONVILLE, FL 32211 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSON, JOHN 6714 HEIDE RD. JACKSONVILLE, FL 32277 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jack Mattison 8041 Fleur de Lis Dr Jacksonville, FL 32277 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JONES, ANITA 6715 SIMCA DRIVE JACKSONVILLE, FL 32277 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLEASON, TOM 13934 SPANISH MARSH CT. JACKSONVILLE, FL 32225 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Angela Gleason 13934 Spanish Marsh Ct. Jacksonville, FL 32225 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Anita Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-07

Date

Daytime Phone #

904-683-3666

ATTACHMENT
60046154
~~#766360~~

ADDENDUM TO 2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT #766360
FORT CAROLINE CHAPTER #3545 OF AARP, INC

ADDITIONAL DIRECTORS:

2ND VPD

Bernice Piotrski
4617 Hartman Rd
Jacksonville, FL 32225

PPD

Audrey MacInnes
4828 Beacon Dr W
Jacksonville, FL 32225

D

Patricia Somers
244 Hickory Hollow Dr S
Jacksonville, FL 32225

D

Joe Warren
3326 Caribbean Ct W
Jacksonville, FL 32277

D

Godfrey Gregory
12020 Hidden Hills Dr
Jacksonville, FL 32225

D

Betty Green
2924 Stonehurst Rd W
Jacksonville, FL 32277

D

Duncan MacInnes
4828 Beacon Dr W
Jacksonville, FL 32225

D

Sophie Riley
10607 Airport Terrace Dr
Jacksonville, FL 32225