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

Feb 17, 2004 8:00 am Secretary of State **DOCUMENT # 766873** 1. Entity Name 02-17-2004 90011 012 ****61.25 GREATER KEYSTONE CHAPTER #3555 OF AARP, INC. Principal Place of Business Mailing Address 17702 SIMMS ROAD 17702 SIMMS ROAD ODESSA FL 33556 ODESSA FL 33556 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 95-3795770 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 (NOTE: Registered Agent signature required when reinstating) Stonature, typed or printed name of registered agent and title if applicable DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2004 Trust Fund Contribution Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete VP Rork. Lucy TITLE Change * Addition MOOREHEAD, BENNIE NAME NAME 15104 ARBOR HOLLOW DR. 18709 Wayne Road STREET ADDRESS STREET ADDRESS ODESSA FL 33556 Odessa FL CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition HETZ, CLAIRE NAME Alas, Victor 3202 Granada Way 15806 CRYING WIND DR. STREET ADDRESS STREET ADDRESS **TAMPA FL 33624** CITY-ST-ZIP CITY-ST-ZIP Tampa FL33613 **▼** Delete RSD TITLE ☐ Change Addition POLLOCK, CAROLE NAME NAME Rudolph, Esther 15806 TIMBERWOOD DR. STREET ADDRESS STREET ADDRESS 13011 Royal George Ave TAMPA FL 33625 CITY-ST-ZIP CITY-ST-ZIP Odessa ΓL 33556 CSD TITLE X Delete TITLE Change Addition ALAS, VICTOR Donna Sailfish Dr Pero, 1 2603 A NAME NAME 3202 GRANDA WAY STREET ADDRESS STREET ADDRESS TAMPA FL 33613 CITY-ST-ZIP CITY-ST-ZIP Lutz FLDelete TITLE TITLE ☐ Change Addition MURRAY, BARBARA NAME NAME 16567 HUTCHINSON RD. STREET ADDRESS STREET ADDRESS ODESSA FL 33556 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Delete ☐ Addition TORNOUIST, AUDREY NAME NAME 8808 EDGEWOOD BLVD STREET ADDRESS STREET ADDRESS TAMPA FL 33635 CITY-ST-78P CITY-ST-ZIP

12. Thereby 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

Jan. 24, 2004

Daylime Phone #

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President

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: &

Bennie Moorehead, P Bennie Moorehead

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED