

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **766912** (0)

1. Corporation Name

ASSOCIATION OF RETIRED ATTORNEYS, INC.



Principal Place of Business

Mailing Address

% DAVID H. HENRETTA
ROOM 208 SARASOTA COUNTY COURTHOUSE
SARASOTA FL 34232-6247

SARASOTA COUNTY ROOM 305 COURTHOUSE
2000 MAIN STREET
SARASOTA FL 34237
US

3. Date Incorporated or Qualified
02/09/1983

3a. Date of Last Report
04/06/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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25

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30

4. FEI Number

59-2352524

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCANLON MICHAEL T
5652 AVENIDA NAVARRA #109
SHERWOOD FOREST
SARASOTA FL 34242

81 Name **R. DONALD KELLY**

82 Street Address (P.O. Box Number Is Not Acceptable)
6948 EASTON WAY

83

84 City **Sarasota**

FL

85 Zip Code **34238**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

R. Donald Kelly

R. DONALD KELLY Treasurer/Dir. Feb 6 1996

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **SCANLON, MICHAEL T.**
STREET ADDRESS **5652 AVENIDA NAVARRA #109**
CITY-ST-ZIP **SARASOTA FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **TD** ☐ DELETE
NAME **KELLY, DONALD**
STREET ADDRESS **6948 EASTON WAY**
CITY-ST-ZIP **SARASOTA FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **PD** ☒ DELETE
NAME **MITCHELL, SIDNEY L.**
STREET ADDRESS **5513 83RD ST. TERR. E.**
CITY-ST-ZIP **SARASOTA FL**

3.1 TITLE **PD** ☒ Change ☐ Addition
3.2 NAME **FRED S MYERS**
3.3 STREET ADDRESS **2675 GULF OF MEXICO DR.**
3.4 CITY-ST-ZIP **Longboat Key, FL 34228**

TITLE **VP** ☐ DELETE
NAME **MORAN, MARJORIE**
STREET ADDRESS **311 PINE RUN DR.**
CITY-ST-ZIP **OSPREY FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **DS** ☐ DELETE
NAME **GALLAGHER, OWEN P**
STREET ADDRESS **1216 SOUTHVIEW DR**
CITY-ST-ZIP **SARASOTA FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☒ DELETE
NAME **ABELL, HERBERT**
STREET ADDRESS **7193 WOOD CRK DR**
CITY-ST-ZIP **SARASOTA FL**

6.1 TITLE **MARGOT MAZEAU** ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS **2301 GULF OF MEXICO DR**
6.4 CITY-ST-ZIP **Longboat Key, FL 34228**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Fred S. Myers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRED S. MYERS 7-16-96

Date

Daytime Phone #

CR2E037 (12/95)