

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768254

FILED  
Jan 23, 2012  
Secretary of State

**Entity Name:** ALTAMONTE SPRINGS CHAPTER #3578 OF AARP, INC.

**Current Principal Place of Business:**

1130 HOBSON ST  
LONGWOOD, FL 32750 US

**New Principal Place of Business:**

727 LITTLE WEKIVA CIRCLE  
ALTAMONTE SPRINGS, FL 32714 US

**Current Mailing Address:**

1130 HOBSON ST  
LONGWOOD, FL 32750 US

**New Mailing Address:**

727 LITTLE WEKIVA CIRCLE  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number:** 95-3827768

**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: T  
Name: BLACKWELL, RUTH  
Address: 727 LITTLE WEKIVA CIRCLE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V  
Name: MCLEAN, CECILY  
Address: 802 RAVENS CIRCLE, #103  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D  
Name: SKLENAR, LORETTA  
Address: 485 BURNT TREE LANE  
City-St-Zip: APOPKA, FL 32712

Title: P  
Name: FITZGERALD, CHRISTINE  
Address: 481 CITRUS LANE  
City-St-Zip: MAITLAND, FL 32751

Title: S  
Name: FREDER, CLARA  
Address: 414 WESTCHESTER DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D  
Name: RICHARDSON, KAREN H  
Address: 1130 HOBSON STREET  
City-St-Zip: LONGWOOD, FL 32750

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: RUTH BLACKWELL

T

01/23/2012

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

\_\_\_\_\_  
Date