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W03-17353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

July 17, 2003

AMY HAUSER
601 E. STREET, NW A7-212
WASHINGTON, DC 20049

SUBJECT: AARP INSTITUTE
Ref. Number: W03000017353

We have received your document for AARP INSTITUTE. However, the document has not been filed and is being returned for the following:

Please complete and return the enclosed document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 503A00042035



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

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03 SEP -3 PM 12:49

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

June 17, 2003

AMY HAUSER
601 E. STREET, NW A7-212
WASHINGTON, DC 20049

SUBJECT: AARP INSTITUTE
Ref. Number: W03000017353

We have received your document for AARP INSTITUTE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 403A00037349

TRANSMITTAL LETTER

FILED
03 SEP -3 PM 12:49
TALLAHASSEE STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: AARP Institute
(Name of Corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Ms. Amy Hauser

(Name of Person)

AARP Institute

(Firm/Company)

601 E Street, NW A7-212

(Address)

Washington, DC 20049

(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Hauser

(Name of Person)

at (

202

434-6215

) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



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03 SEP -3 PM 12:49
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

July 10, 2003

Agnes Lunt
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: AARP Institute, Inc. Letter# 403A00037349

Dear Ms. Lunt:

We have made the changes to our Foreign Not for Profit Application as your June 17, 2003 letter requested. Enclosed please find the following:

- Copy of the June 17, 2003 letter
- Amended Application by Foreign Not for Profit

If you have any additional questions please contact Amy Hauser at (202) 434-6215.

Sincerely,

A handwritten signature in black ink, appearing to read "Doris Dickens", with a long horizontal flourish extending to the right.

Doris Dickens
Law Clerk
Office of General Counsel

Enclosures

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

FILED

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. AARP Institute, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. Washington, DC

(State or country under the law of which it is incorporated)

3. 52-0788950

(FEI number, if applicable)

4. July 24, 1963

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. October 25, 2001

(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)

601 E Street, NW A7-240 Washington, DC 20049

7. _____
(Principal office address)

same as above

(Current mailing address)

8. Issue charitable gift annuities to residents in Florida

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: CT Corporation

Office Address: 1200 S. Pine Island Road

Plantation

(City)

Florida

33324

(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Stacy M. Rosenthal
Vice President and
Assistant Secretary

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: William D. Novelli _____

Address: AARP Institute, Inc. 601 E Street, NW Washington, DC 20049 _____

Vice President: _____

Address: _____

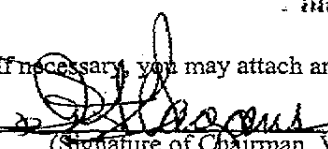
Secretary: Richard W. Henry _____

Address: AARP Institute, Inc. 601 E Street, NW Washington, DC 20049 _____

Treasurer: Robert R. Hagans, Jr. _____

Address: 601 E Street, NW Washington, DC 20049 _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Robert R. Hagans, Jr., Treasurer _____

(Typed or printed name and capacity of person signing application)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: N/A

Address: _____

Vice Chairman: N/A

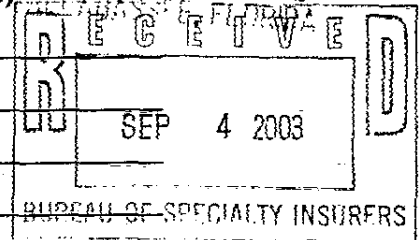
Address: _____

Director: N/A

Address: _____

Director: N/A

Address: _____



B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: William D. Novelli

Address: 601 E Street, NW, Washington, DC ,20049

Vice President: Not Applicable

Address: _____

Secretary: Richard W. Henry

Address: 601 E Street, NW, Washington, DC 20049

Treasurer: Robert R. Hagans, Jr.

Address: 601 E Street, NW, Washington, DC 20049

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. William D. Novelli
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

William D. Novelli, President

(Typed or printed name and capacity of person signing application)

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



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U.S. DISTRICT COURT
DISTRICT OF COLUMBIA
WASHINGTON, D.C.

C E R T I F I C A T E

THIS IS TO CERTIFY that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the **24th day of July, 1963** *Articles of Incorporation of:*

AARP INSTITUTE

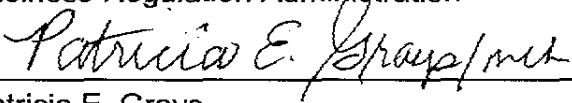
The above named corporation is duly incorporated and existing pursuant to and by virtue of the Nonprofit Corporation Act of the District of Columbia and authorized to **conduct its affairs** in the District of Columbia as of the date mentioned above.

WE FURTHER CERTIFY that the above entitled corporation is at the time of issuance of this certificate in **Good Standing**, according to the records of the Corporations Division, having filed all reports required by the District of Columbia Nonprofit Corporation Act.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed this **22nd day of May, 2003**.

David Clark
DIRECTOR

Elizabeth O. Kim
Administrator
Business Regulation Administration


Patricia E. Grays
Superintendent of Corporations
Corporations Division

Anthony A. Williams
Mayor