


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

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90011 017 ****61.25

DOCUMENT # N00000005288					
1. Entity Name MIAMI RICHMOND HEIGHTS CHAPTER #5312 OF AARP, INC.					
Principal Place of Business 11535 SW 142ND ST. RICHMOND HEIGHTS FL 33176-6305			Mailing Address 11535 SW 142ND ST. RICHMOND HEIGHTS FL 33176-6305		
2. Principal Place of Business Second Baptist Church Suite, Apt. #, etc. 11111 Pinkston Drive City & State Miami, Florida Zip 33176 Country USA		3. Mailing Address 14101 Jefferson St. Suite, Apt. #, etc. City & State Miami, Florida Zip 33176 Country USA			
4. FEI Number NO-T APPLICABLE				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCNABB, LEE 11535 SW 142ND ST. RICHMOND HEIGHTS FL 33176-6305			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	D	<input type="checkbox"/> Delete	TITLE	MCNABB, LEE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	11535 SW 142ND ST.		NAME	MIAMI FL 33176	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	CORBETT, GERALDINE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10773 SW 142ND LANE		NAME		
STREET ADDRESS	RICHMOND HEIGHTS FL 33176-6538		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	HARRIS, ROSETTA	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	14101 JEFFERSON ST		NAME		
STREET ADDRESS	MIAMI FL 33176		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	ROBERSON, NED	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	11501 SW 142ND ST.		NAME		
STREET ADDRESS	RICHMOND HEIGHTS FL 33176-6305		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	HARRIS, ULYSSES JR.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	14101 JEFFERSONS ST.		NAME		
STREET ADDRESS	RICHMOND HEIGHTS FL 33176		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby 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 changed, or on an attachment with an address with other like empowered.					
SIGNATURE: <i>Ulysses Harris</i>		Ulysses Harris		02/14/04 305 238 02632	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	