

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03698

FILED
Mar 10, 2009
Secretary of State

Entity Name: WEST ORANGE CHAPTER #3697 OF AARP, INC.

Current Principal Place of Business:

HYDE PARK MOBILE PARK
14253 W. COLONIAL DRIVE
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

Current Mailing Address:

867 ROYAL VIEW CIRCLE
WINTER GARDEN, FL US

New Mailing Address:

867 ROYAL VIEW CIRCLE
WINTER GARDEN, FL 34787 US

FEI Number: 33-0042706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMBRUSTER, SARA
867 ROYAL VIEW CIRCLE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

ARMBRUSTER, SARAH P
867 ROYAL VIEW CIRCLE
WINTER GARDEN, FL 34787 US

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: SARAH P. ARMBRUSTER

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: WASHINGTON, MILDRED
Address: 908 EAST BAY STREET
City-St-Zip: WINTER GARDEN, FL 34787

Title: VD () Delete
Name: GROSS, GWENDOLYN
Address: 517 GARDEN HTS DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: TD () Delete
Name: ARMBRUSTER, SARA
Address: 867 ROYAL VIEW CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: OLSON, EDITH
Address: 690 HYDE PARK CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

Title: TD (X) Change () Addition
Name: ARMBRUSTER, SARAH P
Address: 867 ROYAL VIEW CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SARAH P. ARMBRUSTER

TD

03/10/2009

Electronic Signature of Signing Officer or Director

Date