

4500

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N03703

Entity Name
HOBE SOUND CHAPTER #3700 OF AARP, INC.



FILED

03 JUN 30 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
IVIC CENTER
8980 S.E. OLYMPUS ST
HOBE SOUND, FL 33455

Mailing Address
945 SW ALL AMERICAN BLVD.
PALM CITY, FL 34990-3811



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

RONALD PECK
Suite, Apt. #, etc.
6993 S.E. BUNKER HILL OR.

4. FEI Number

59-2291513

Applied For
Not Applicable

Suite, Apt. #, etc.

City & State

City & State
HOBE SOUND FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Zip

Country

Zip

Country

33455-7317 MARTIN

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C.T. CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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

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

(NOTE: Registered Agent signature required when registering)

DATE

600020792206
06/11/03--01093--001 **61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☒ Delete
NAME P
CERCTUAIA, ANTHONY
STREET ADDRESS 9210 YACHI CLUB CIRCLE
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE ☒ Delete
NAME VP
BATES, RICHARD L SR
STREET ADDRESS 945 SW ALL AMERICAN BLVD
CITY-ST-ZIP PALM CITY, FL 349903811

TITLE ☒ Delete
NAME T
GUIDER, MINNIE
STREET ADDRESS 6083 SE SARATOGA DRIVE
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE ☒ Delete
NAME SD
NASSE, CHARLOTTE
STREET ADDRESS 7245 REDBIRD CIRCLE
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE ☒ Delete
NAME CD
PICK, JOSYAH
STREET ADDRESS 7081 SE SWEETWOOD TERR.
CITY-ST-ZIP STUART, FL 34997

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME P
CERCHIARA, ANTHONY V.
STREET ADDRESS 9210 S.E. YACHT CLUB CIR
CITY-ST-ZIP HOBE SOUND, FL President

TITLE ☒ Change ☐ Addition
NAME VP
ANDERSON, JOHN, E.
STREET ADDRESS 8914 S.E. BOBO COURT.
CITY-ST-ZIP HOBE SOUND, FL 33455 Vice President

TITLE ☒ Change ☐ Addition
NAME T
PECK, RONALD A.
STREET ADDRESS 6993 S.E. BUNKER HILL
CITY-ST-ZIP HOBE SOUND, FL 33455.7317 DATA MANAGER

TITLE ☒ Change ☐ Addition
NAME S
PECK, JOSEPH H.
STREET ADDRESS 7081 S.E. SWEETWOOD TERRACE
CITY-ST-ZIP STUART FL 34997 Secretary

TITLE ☒ Change ☐ Addition
NAME
RE MILLARD, SIMONE
STREET ADDRESS 6431 S.E. PEO HWY
CITY-ST-ZIP STUART, FL 34997 Supplies

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 all other like empowered.

SIGNATURE:

Anthony V. Cerchiara
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/03 772-546 8397

Date

Daytime Phone #

ANTHONY V. CERCHIARA, PRES

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