

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90001 030 ****61.25

DOCUMENT # N12334

1. Entity Name

LAKES CHAPTER #3837 OF AMERICAN ASSOCIATION OF R

Principal Place of Business

MIAMI LAKES COMMUNITY CENTER
 15151 MONTROSE RD
 MIAMI LAKES FL 33014
 US

Mailing Address

LAKES CHAPTER AARP
 550 SW 138TH AVE K403
 HOLLYWOOD FL 33027
 US

2. Principal Place of Business

3. Mailing Address

LAKES CHAPTER AARP

Suite, Apt. #, etc.
 550 SW 138th Ave N-403

City & State
 Pembrokeshire Pines FL

Zip
 33027

Country
 BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2457494

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHERRY, FRED
 6315 GAGE PLACE
 B 309
 MIAMI LAKES FL 33014

7. Name and Address of New Registered Agent

Name
 DON COLBERT

Street Address (P.O. Box Number is Not Acceptable)
 3860 W 2 Ave

City
 Hialeah

FL

Zip Code
 33012

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.

SIGNATURE *Donald L. Colbert*

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

(NOTE: Registered Agent signature required when reinstating)

March 9th 2001

DATE

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CHERRY, FRED 6315 GAGE PLACE #B309 MIAMI LAKES FL 33014	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HENKE, RUTH 7791 W 18TH LN MIAMI LAKES FL 33014	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS FRITCH, ROSEMARY 67963 SHARPECROFT COURT MIAMI LAKES FL 33014	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FRINK, CLARE 550 SW 138TH AVE #K403 PEMBROKE PINES FL 33027	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COX, VIRGINIA 17321 NW 51 PLACE MIAMI FL 33055	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FIENE, HELEN 6023 EAST 67TH AVENUE HIALEAH FL 33013	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DON COLBERT 3860 W 2 Ave HIALEAH FL 33012	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CHERRY, FRED 6315 GAGE PLACE #B309 MIAMI LAKES FL 33014	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS FRITCH, ROSEMARY 67963 SHARPECROFT CT MIAMI LAKES FL 33014	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FRINK, CLARE 550 SW 138th Ave N-403 PEMBROKE PINES FL 33027	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DMARY CAFFARELLI 651 E 38 ST HIALEAH FL 33013	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FIENE, HELEN 6023 E. 67 Ave HIALEAH FL 33013	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Donald L. Colbert*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 9-01 (954) 442-7110

Date Daytime Phone #

CR2E037 (10/00)