

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

FILED
Feb 14, 2003 8:00 am
Secretary of State

01-21-2003 90090 045 ****61.25

DOCUMENT # N20292

1. Entity Name

DELAND CHAPTER #4029 OF AARP, INC.

Principal Place of Business

WAYNE SANBORN ACTIVITY CENTER
EARL BROWN PARK
DELAND FL 32724
US

BUSINESS MAILING
Address

429 W PENN AVE AARP DELAND CHPT #4029
DELAND FL 32720 P.O. BOX 4654
US DELAND, FL
32721-4654

2. Principal Place of Business

3. Mailing Address

101 AMELIA AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

APT. # 608

City & State

City & State
DELAND, FL

Zip

Country

Zip

Country

32724

FLORIDA

4. FEI Number 33-0192400

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AMMON, JACK
429 W PENN AVE
DELAND FL 32720

7. Name and Address of New Registered Agent

Name PAUL R. Goodwill
Street Address (P.O. Box Number is Not Acceptable)
APT. # 608
City Deland, FL FL Zip Code 32724

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 PAUL R. Goodwill

Paul R. Goodwill

JAN-17-03

FILE NOW: FEE IS \$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	IPD	<input type="checkbox"/> Delete
NAME	AMMON, JACK	
STREET ADDRESS	429 W PENN AVE	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	VD	<input type="checkbox"/> Delete
NAME	FOX, ROBERT	
STREET ADDRESS	2485 E GLENEAGLES DR	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	SI	<input type="checkbox"/> Delete
NAME	CONEON, MUREIL	
STREET ADDRESS	253 N HILL AVE	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MORELOCK, HELEN	
STREET ADDRESS	920 HUNTER'S CREEK DR APT 5104	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	D	<input type="checkbox"/> Delete
NAME	CONLAN, MURI L	
STREET ADDRESS	253 N. HILL AVE	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOORE, BETTY	
STREET ADDRESS	174 N HILL AVE	
CITY-ST-ZIP	DELAND FL 32724	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAUL R. Goodwill	
STREET ADDRESS	101 AMELIA AVE APT. # 608	
CITY-ST-ZIP	DELAND, FL. 32724	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANK W. HALEY	
STREET ADDRESS	1800 E. GRAVES AVE.	
CITY-ST-ZIP	ORANGE CITY, FL. 32763	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARILYNN STRONG	
STREET ADDRESS	41345 DEER STS	
CITY-ST-ZIP	CUSTIS, FL. 32736	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CLORENCE I MILLER	
STREET ADDRESS	1519 Red Plum Hollow	
CITY-ST-ZIP	DELAND, FL. 32720	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACQUELINE WESTLOKE	
STREET ADDRESS	3112 Hickory Tree Lane	
CITY-ST-ZIP	DELAND, FL. 32724	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Paul Robert Goodwill	
STREET ADDRESS	AARP Chapt. 4029	
CITY-ST-ZIP	P.O. BOX 4654 DELAND, FL 32721-4654	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: PAUL R. Goodwill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAN-17-03

CR2E037 (10/02)

Attachment 55007298
N20292

February 11, 2003
Annual Reports Section of Florida Dept. of State
Den Detzner, Sec. Of State
Reference Number: N20292

Dear Sir:

Please note that DeLand Chapter #4029 of AARP, Inc. now has a permanent address which is:

AARP DeLand Chapter #4029
P.O. Box 4654
DeLand, Florida, 32721-4654

The above address is our only business address listed on the corporation business report. All other addresses are personal residence.

I trust this clarifies whatever problems the mistakes in this report may have caused. It was an oversight on our part to have neglected the indication of our Board Members.

Sincerely,

Paul Robert Goodwill

Paul Robert Goodwill