

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N22512 (0)

1. Corporation Name

PANAMA CITY BEACH CHAPTER #4062 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.



Principal Place of Business

Mailing Address

WILLIAM RANDALL  
5801 THOMAS DR. APT. 1123  
PANAMA CITY BEACH FL 32408  
US

WILLIAM RANDALL  
5801 THOMAS DR. APT. 1123  
PANAMA CITY BEACH FL 32408  
US

3. Date Incorporated or Qualified

09/16/1987

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 SAME

26 SAME

4. FEI Number

33-0192600

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RANDALL, WILLIAM  
5801 THOMAS DR  
APT. 1123  
PANAMA CITY BEACH FL 32408

81 Name

SAME

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE OFIE D. PERKINS - TREASURER

(NOTE: Registered Agent's signature required when reinstating)

3-19-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS ANKNEY, DEE  
CITY-ST-ZIP 112 FIRWAY BLVD #101  
PANAMA CITY BCH FL 32407

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME D  
1.3 STREET ADDRESS RAY STEINBRECHER  
1.4 CITY-ST-ZIP 111 CHRISTOPHER DR.  
PANAMA CITY BEACH, FL 32407

TITLE ☐ DELETE  
NAME 2V  
STREET ADDRESS PENTZER, MILTON  
CITY-ST-ZIP 213 GREENWOOD DR  
PANAMA CITY BCH FL 32407

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME D  
2.3 STREET ADDRESS LILLIAN STRICKLAND  
2.4 CITY-ST-ZIP 21511 DOLPHIN AVE.  
PANAMA CITY BEACH, FL 32413

TITLE ☐ DELETE  
NAME TD  
STREET ADDRESS PERKINS, OFIE D  
CITY-ST-ZIP 141 CINDY LANE  
PANAMA CITY BEACH FL 32407

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME V  
STREET ADDRESS STRICKLAND, JAMES  
CITY-ST-ZIP 21511 DOLPHIN AVE  
PANAMA CITY BCH FL 32413

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS RAMOS, EDWARD  
CITY-ST-ZIP 2119 W 29TH CT  
PANAMA CITY BCH FL 32405

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME P  
STREET ADDRESS RANDALL, WILLIAM  
CITY-ST-ZIP 5801 THOMAS DR APT 1123  
PANAMA CITY BCH FL 32408

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: OFIE D. PERKINS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-96

Date

904-235-1772

Daytime Phone #

CR2E037 (12/95)