

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25376

FILED
Jan 18, 2012
Secretary of State

Entity Name: WESTSIDE JACKSONVILLE CHAPTER #4098 OF AARP, INC.

Current Principal Place of Business:

12779 FLYNN FOREST DR.
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

5344 SLOAN LANE
JACKSONVILLE, FL 32244 US

Current Mailing Address:

12779 FLYNN FOREST DR.
JACKSONVILLE, FL 32223 US

New Mailing Address:

5344 SLOAN LANE
JACKSONVILLE, FL 32244 US

FEI Number: 94-3053343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, KATHY L
12779 FLYNN FOREST DR.
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

CASTLEBERRY, PAULA
5344 SLOAN LAONE
JACKSONVILLE, FL 32244 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: PAULA CASTLEBERRY

01/18/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CASTLEBERRY, PAULA
Address: 5344 SLOAN LANE
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: 1VP
Name: BARTON, PAUL
Address: 5834 NORDE DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: S
Name: CHEWNING, MARTHA
Address: 4639 SUNDERLAND ROAD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: T
Name: SWAYNE, ELIZABETH S
Address: 5714 NORDE DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32244 US

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH S. SWAYNE

TREA

01/18/2012

Electronic Signature of Signing Officer or Director

Date