FILE NOW: FILING FEE IS $61.25

97-98 AR

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

FILED
98 JUN 24 AM 10:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400002305514 9/29/97 01004/010 $61.25
$ dep.

DOCUMENT # N33166

1. Corporation Name
ORANGE BLOSSOM LADY LAKE CHAPTER #4432 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC

Principal Place of Business	Mailing Address
c/o C. GORDON LYNN 509 ALAMEDA AVENUE LADY LAKE, FL 32159 US	c/o C. GORDON LYNN 509 ALAMEDA AVENUE LADY LAKE, FL 32159 US

3. Date Incorporated or Qualified: 7/20/1989

4. FEI Number: 94-3085220 ☐ 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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 LA HACIENDA CENTER	26 OBG AARP CHAPTER 4432
Suite, Apt. #, etc. 22 1100 MAIN STREET	Suite, Apt. #, etc. 27 BOX 1015
City & State 23 LADY LAKE FL	City & State 28 LADY LAKE, FL
Zip / Country 24 32159 / 25 US	Zip / Country 29 32158 / 30 US

9. Name and Address of Current Registered Agent

LYNN, C. GORDON
509 ALAMEDA AVENUE
LADY LAKE, FL 32159

10. Name and Address of New Registered Agent

81 Name: SHIRLEY L. DAVIS
82 Street Address (P.O. Box Number is Not Acceptable): 1109 W BOONE CT
83
84 City: LADY LAKE FL 85 Zip Code: 32159

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: SHIRLEY L DAVIS/P/D — Shirley L. Davis — 4-26-98
Signature, Typed or Printed Name of Registered Agent and Title, if Applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D LYNN, C. GORDON 509 ALAMEDA AVENUE LADY LAKE, FL 32159	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P/D SHIRLEY L. DAVIS 1109 W BOONE CT LADY LAKE, FL 32159	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D BALFOUR, ROBERT 213 ARAGON LANE LADY LAKE, FL 32159	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	V/D RICHARD C. LICHTENBERGER 1011 SAN REMO LANE LADY LAKE, FL 32159	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D SHARON WHEELER 316 SAN MARINO DR LADY LAKE, FL 32159	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	400002305514---4 -06/30/98--01008--001 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D LAMB, RAMONA 166 KILEY COURT LADY LAKE, FL 32159	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T/D HAROLD E. BARNES 1210 E SCHWARTZ BLVD LADY LAKE, FL 32159	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUTH N LICHTENBERGER 1011 SAN REMO LANE LADY LAKE, FL 32159	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHARD C. LICHTENBERGER 1011 SAN REMO LANE LADY LAKE, FL 32159	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D AUDREY REINEKE 924 ST ANDREWS BLVD LADY LAKE, FL 32159	☐ Change ☒ Addition

CR2E037 (10/97)

14. 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 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: HAROLD E. BARNES, T/D — Harold E. Barnes — 4/25/98 — (352)753-8810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #