

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2007 8:00 am**  
**Secretary of State**

04-04-2007 90165 048 \*\*\*\*61.25

**DOCUMENT # N33166**

1. Entity Name  
**ORANGE BLOSSOM-LADY LAKE CHAPTER #4432 OF  
AARP, INC.**



Principal Place of Business  
**LA HACIENDA CENTER  
1100 MAIN STREET  
LADY LAKE, FL 32159 US**

Mailing Address  
**1210 E SCHWARTZ BLVD  
LADY LAKE, FL 32159**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03222007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number

**94-3085220**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

Name

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

City

**FL**

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

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 PD  
NAME GRAY, MARGARET ☒ Delete  
STREET ADDRESS 535 ST ANDREWS BLVD  
CITY-ST-ZIP LADY LAKE, FL 32159

TITLE D  
NAME BARNES, SHIRLEY A ☒ Delete  
STREET ADDRESS 1210 E SCHWARTZ BLVD  
CITY-ST-ZIP LADY LAKE, FL 32159

TITLE VD ☒ Delete  
NAME BRENNAN, ROBERT  
STREET ADDRESS 912 VENTURA DR  
CITY-ST-ZIP LADY LAKE, FL 32159

TITLE SD ☒ Delete  
NAME FLYNN, MARY ANN  
STREET ADDRESS 570 FOXFIELD PATH  
CITY-ST-ZIP THE VILLAGES, FL 32162

TITLE TD ☐ Delete  
NAME BARNES, HAROLD  
STREET ADDRESS 1210 E SCHWARTZ BLVD  
CITY-ST-ZIP LADY LAKE, FL 32159

TITLE D ☐ Delete  
NAME SAMPLES, WILMER  
STREET ADDRESS 1005 RICHARD DR  
CITY-ST-ZIP LADY LAKE, FL 32159

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☒ Addition  
NAME ROBERT BRENNAN  
STREET ADDRESS 912 VENTURA DR  
CITY-ST-ZIP THE VILLAGES FL 32159

TITLE VD ☐ Change ☒ Addition  
NAME WALTER MARTIN  
STREET ADDRESS 2074 JASPER WAY  
CITY-ST-ZIP THE VILLAGES FL 32162

TITLE D ☐ Change ☒ Addition  
NAME LUCY CRADY  
STREET ADDRESS 1148 CHAPARRAL DR  
CITY-ST-ZIP LADY LAKE, FL 32159

TITLE SD ☒ Change ☐ Addition  
NAME MARGARET GRAY  
STREET ADDRESS 535 ST ANDREWS BLVD  
CITY-ST-ZIP LADY LAKE FL 32159

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

*Harold Barnes*

**HAROLD BARNES**

**APRIL 2, 2007**

**352-753-8810**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #