2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34039

FILED Feb 21, 2009 Secretary of State

Entity Name: GREATER BRANDON CHAPTER #4442 OF AARP, INC.

Current Principal Place of Business: New Principal Place of Business: BRANDON, FL 33510 US **Current Mailing Address: New Mailing Address:** 502 CHILT DR BRANDON, FL 33510 US FEI Number: 93-4100344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 S PINE ISLAND RD US FORT LAUDERDALE, FL 33328 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete TATROM, MICHAEL JOHNSON, ALFRED Name: Name: 1702 WOODBERRY RD Address: 1054 BRIDLEWOOODD WAY Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33511 Title: VD () Delete Title: VD (X) Change () Addition TRINIZIVALLI, CHRIS Name: BOYD, ELIZABETH Name: Address: 716 CHOO CHOO LANE Address: 13438 SILVER CREEK DR. City-St-Zip: VALRICO, FL 33594 City-St-Zip: RIVERVIEW, FL 33569 Title: () Delete Title: SD (X) Change () Addition STARLING, MARY MUNGER, LOIS Name: Name: 615 HILLDINE WAY Address: Address: 8011 RUSSEL LANE City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33510 Title: TD () Delete Title: () Change () Addition Name: POPOVICH, JEAN L Name: Address: 502 CHILT DR Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: Title: () Delete Title: () Change () Addition CASTILLO, KATHRYN G Name: Name: 117 MOROW CIRCLE Address: Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: Title: () Delete Title: () Change () Addition MUNGER, LOIS Name: Name: 801 RUSSELL LANE Address: Address: BRANDON, FL 33510 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JEAN L. POPOVICH TD 02/21/2009