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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # **N46343** **(2)**

1. Corporation Name

BOYNTON BEACH WEST CHAPTER #4693 OF AMERICA ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business	Mailing Address
C/O ROSE BERTOLINI 112 MAYFAIR LANE BOYNTON BEACH FL 33462 US	C/O ROSE BERTOLINI 112 MAYFAIR LANE BOYNTON BEACH FL 33462 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/05/1991
3a. Date of Last Report: 05/01/1994
4. FEI Number: 52-1713804 ☐ 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22: none	Suite, Apt. #, etc. 27: none
City & State 23	City & State 28: none
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

DAMAN, ANNE
791 SUN TREE PLACE
BOYNTON BEACH FL 33436

10. Name and Address of New Registered Agent

81 Name: Walter Ulrich
82 Street Address (P.O. Box Number is Not Acceptable): 2865 S W 9th St
83: Boynton Beach
84 City: FL 85 Zip Code: 33435

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Walter Ulrich — WALTER Ulrich — 3/29/95
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	P/	11 TITLE	President/D ☒ Change ☐ Addition
NAME	DAMAN, ANNE	12 NAME	Walter Ulrich
STREET ADDRESS	791 SUN TREE PLACE	13 STREET ADDRESS	2865 S W 9th St
CITY-ST-ZIP	BOYNTON BEACH FL	14 CITY-ST-ZIP	Boynton Beach FL 33435
TITLE	VD	21 TITLE	Vice President/VD ☐ Change ☐ Addition
NAME	ULRICH, WALTER	22 NAME	Richard Rawling
STREET ADDRESS	2865 S. W. NINTH STREET	23 STREET ADDRESS	3 [illegible]
CITY-ST-ZIP	BOYNTON BEACH FL	24 CITY-ST-ZIP	[illegible] FL 33462
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	KIRBY, BERNEDETTE	32 NAME	
STREET ADDRESS	9815-3 PINEAPPLE TREE DRIVE	33 STREET ADDRESS	none
CITY-ST-ZIP	BOYNTON BEACH FL 33436	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	☐ Change ☐ Addition
NAME	BERTOLINI, ROSE	42 NAME	
STREET ADDRESS	112 MAYFAIR LANE	43 STREET ADDRESS	none 200001483692
CITY-ST-ZIP	BOYNTON BEACH FL	44 CITY-ST-ZIP	-05/11/95--01016--001 ****9038.75 ****130.00
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	AP 5/10 ☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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: Rose Bertolini — ROSE BERTOLINI — 3/29/95 — 407-6111 — 32119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0060949