

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90253 004 ****61.25

DOCUMENT # N94000002070

1. Entity Name

WINTER SPRINGS CHAPTER #4949 OF AARP, INC.



Principal Place of Business

**76 MAJORCA CR
WINTER SPRINGS FL 32708
US**

Mailing Address

**76 MAJORCA CR
WINTER SPRINGS FL 32708
US**

2. Principal Place of Business

76 MAJORCA DRIVE
Suite, Apt. #, etc.

3. Mailing Address

76 MAJORCA DRIVE
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3379864**

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

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

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25

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** ☐ Delete
NAME **LANGDON, AL**
STREET ADDRESS **76 MAJORCA DR**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE **VP** ☐ Delete
NAME **LEVY, DIANE**
STREET ADDRESS **164 COSTA DR.**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE **SD** ☒ Delete
NAME **PEDERSON, JANICE**
STREET ADDRESS **918 PUND TRAIL**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE **TD** ☒ Delete
NAME **KENNEDY, JAMES**
STREET ADDRESS **1038 CHATHAM PINES DR**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE **D** ☐ Delete
NAME **KREINER, ISLA**
STREET ADDRESS **806 BIG BUCK DR.**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE **D** ☒ Delete
NAME **RAYL, FRANCES**
STREET ADDRESS **347 FAIRGREEN PL**
CITY-ST-ZIP **CASSELBERRY FL 32707**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE **SD** ☐ Change ☒ Addition
NAME **EMILY GRIFFITHS**
STREET ADDRESS **1013 BRADFORD**
CITY-ST-ZIP **WINTER PARK FL 32792**

TITLE **TD** ☐ Change ☒ Addition
NAME **DAVID REESE**
STREET ADDRESS **1444 MT LAUREL DR.**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

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

TITLE **D** ☐ Change ☒ Addition
NAME **JOAN HAUSLEITER**
STREET ADDRESS **216 SECRET WAY**
CITY-ST-ZIP **CASSELBERRY FL 32707**

12. 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 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 another like empowered.

SIGNATURE: ALBERT LANGDON

4/21/03

407 327-1176

CR2E037 (10/02)