


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90162 031 ****61.25

DOCUMENT # N94000003398

1. Entity Name
RICHARDSON HEIGHTS CHAPTER #4951 OF AARP, INC.



Principal Place of Business
**BERTHA W RICHARDSON
 1304 WHITNER STREET
 JACKSONVILLE, FL 32209-7355 US**

Mailing Address
**BERTHA W RICHARDSON
 1304 WHITNER STREET
 JACKSONVILLE, FL 32209-7355 US**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country



04272006 Chg-NP CR2E037 (11/05)

4. FEI Number
52-1844044

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**RICHARDSON, BERTHA W
 1304 WHITNER STREET
 JACKSONVILLE, FL 32209-7355**

7. Name and Address of New Registered Agent

Name **Eugenia Nellon**

Street Address (P.O. Box Number is Not Acceptable)
3100 Trent River Blvd

City **Jacksonville**

State **FL** Zip Code **32208**

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 **Eugenia Nellon** DATE **4-27-06**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is **\$61.25** Due by **May 1, 2006**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	BORDERS, ERNEST SR.	3367 ALTAMONTE AVENUE	JACKSONVILLE, FL 322081331	<input type="checkbox"/>
DV	MENTER, ERNEST L	8464 FINCH AVENUE EAST	JACKSONVILLE, FL 322193699	<input type="checkbox"/>
TS	SHUMAN, BARABARA	4297 FRANCIS ROAD	JACKSONVILLE, FL 322091905	<input type="checkbox"/>
T	RICHARDSON, BERTHA W	1304 WHITNER STREET	JACKSONVILLE, FL 322097355	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	Eugenia Nellon	3100 Trent River Blvd	Jacksonville, Fl. 32208	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 **Eugenia Nellon, Eugenia Nellon,** DATE **4-27-06** DAYTIME PHONE # **764-4009**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR