2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005
Secretary of State

DOCUMENT# N95000002900

Entity Name: MID-ORLANDO CHAPTER #5046 OF AARP, INC.

Current Principal Place of Business:

99 E. MARKS ST.
ORLANDO, FL 32808 US

New Principal Place of Business:

Current Mailing Address:

4360 S LAKE ORLANDO PARKWAY
ORLANDO, FL 32808 US

New Mailing Address:

FEI Number: 52-1892261 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANGLES,, BONNYE
4360 S LAKE ORLANDO PKWY
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: STRANGE, WILLIAM J
Address: P O BOX 311
City-St-Zip: ORLANDO, FL 32801

Title: VD ( ) Delete
Name: SARGENT, PHILBROOK F
Address: 12 W VANDERBILT STREET
City-St-Zip: ORLANDO, FL 32804

Title: SD ( ) Delete
Name: BRACEY, STROTHER
Address: 4378 S. LAKE ORLANDO PARKWAY
City-St-Zip: ORLANDO, FL 32808

Title: TV ( ) Delete
Name: ANGLES, BONNYE
Address: 4360 S LAKE ORLANDO PKWY
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: BRONSON, MARY E
Address: 20535 NEWBY ST.
City-St-Zip: ORLANDO, FL 32833

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BONNYE ANGLES TV 04/05/2005

Electronic Signature of Signing Officer or Director — Date