

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002929

1. Entity Name

KINGS POINT/TAMARAC CHAPTER #5054 OF AMERICAN AS

AARP

FILED

Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90033 032 ****66.25

0047767

Principal Place of Business

7440 ASHMONTE CIRCLE
C/O LEO KLEIMAN
TAMARAC FL 33321

Mailing Address

7440 ASHMONTE CIRCLE
C/O LEO KLEIMAN
TAMARAC FL 33321

00004518



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-1882783

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

7. Name and Address of New Registered Agent

BECKMAN, NAT
9561 NO. BELFORT CIRCLE
TAMARAC FL 33321

Name LEO KLEIMAN

Street Address (P.O. Box Number is Not Acceptable)
7440 ASHMONTE CIRCLE

City TAMARAC

FL

Zip Code 33321

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.

SIGNATURE LEO KLEIMAN

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/8/2001

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☒

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BECKMAN, NAT ☒ Delete
STREET ADDRESS 9561 NO. BELFORT CIRCLE
CITY-ST-ZIP TAMARAC FL

TITLE 1VP
NAME SCHOLL, BURTON ☒ Delete
STREET ADDRESS 7632 FAIRFAX DRIVE
CITY-ST-ZIP TAMARAC FL 33321

TITLE S
NAME BECKMAN, HELEN ☒ Delete
STREET ADDRESS 9561 N BELFORT CIR
CITY-ST-ZIP TAMARAC FL

TITLE DT
NAME KLEIMAN, LEO ☐ Delete
STREET ADDRESS 7440 ASHMONTE CIRCLE
CITY-ST-ZIP TAMARAC FL

TITLE D
NAME ABRAMSON, MILDRED ☒ Delete
STREET ADDRESS 7484 TRENT DRIVE
CITY-ST-ZIP TAMARAC FL 33321

TITLE D
NAME ABRAMSON, HAROLD ☒ Delete
STREET ADDRESS 7484 TRENT DR
CITY-ST-ZIP TAMARAC FL 33321

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD SCHOLL, BURT ☒ Change ☐ Addition
NAME
STREET ADDRESS 7632 FAIRFAX DR.
CITY-ST-ZIP TAMARAC FL 33321

TITLE 1VP SINGER, BEANARD ☒ Change ☐ Addition
NAME
STREET ADDRESS 7479 FAIRFAX DRIVE
CITY-ST-ZIP TAMARAC, FL. 33321

TITLE S BIE, PHYLLIS ☒ Change ☐ Addition
NAME
STREET ADDRESS 7637 TRENT DR.
CITY-ST-ZIP TAMARAC FL. 33321

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

TITLE D BLANCHARD, DAVE ☒ Change ☐ Addition
NAME
STREET ADDRESS 9587 WELDON CIRCLE
CITY-ST-ZIP TAMARAC FL. 33321

TITLE D BECKMAN, NAT ☒ Change ☐ Addition
NAME
STREET ADDRESS 9561 NO. BELFORT CIRCLE
CITY-ST-ZIP TAMARAC, FL. 33321

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 all other like empowered.

SIGNATURE: BURT SCHOLL PRESIDENT

Date

Daytime Phone #

CR2E037 (10/00)