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Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Horne Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000004388 (1)**

1. Corporation Name

LAKE & HILLS CHAPTER #5199 OF AMERICAN ASSOCIATION OF RETIRED PERSONS, INC.

Principal Place of Business

Mailing Address

**685 MINNEOLA AVENUE
CLERMONT FL 34711**

**685 MINNEOLA AVENUE
CLERMONT FL 34711**

3. Date Incorporated or Qualified

08/01/1997

4. FEI Number

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 15733 CHARTER OAK
Suite, Apt. #, etc.

26 PO BOX 120665
Suite, Apt. #, etc.

22

27

City & State

City & State

23 CLERMONT

28 CLERMONT

24 34711

25 LAKE

29 34711

30 LAKE

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CHERTOS, GEORGE
685 MINNEOLA AVENUE
CLERMONT FL 34711**

81 Name

WATERS JOSEPH

82 Street Address (P.O. Box Number is Not Acceptable)

15733 CHARTER OAK TR

83

84 City

CLERMONT

FL

85 Zip Code

34711

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Joseph T. Waters

(NOTE: Registered Agent signature required when reinstating)

February 16, 1998

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **CHERTOS, GEORGE**
STREET ADDRESS **685 MINNEOLA**
CITY-ST-ZIP **CLERMONT FL 34711**

1.1 TITLE **PD** ☐ Change ☐ Addition
1.2 NAME **WATERS JOSEPH**
1.3 STREET ADDRESS **15733 CHARTER OAK TR**
1.4 CITY-ST-ZIP **CLERMONT FL 34711**

TITLE **VD** ☐ DELETE
NAME **LUSK, AMEL**
STREET ADDRESS **969 TODD WAY**
CITY-ST-ZIP **TAVARES FL 32778**

2.1 TITLE **VD** ☐ Change ☐ Addition
2.2 NAME **LUSK RALPH**
2.3 STREET ADDRESS **969 TODD WAY**
2.4 CITY-ST-ZIP **TAVARES FL 32778**

TITLE **SD** ☐ DELETE
NAME **AUSMUS, ELAINE**
STREET ADDRESS **13147 SUBURBAN TERRACE**
CITY-ST-ZIP **WINTER GARDEN FL 34787**

3.1 TITLE **SD** ☐ Change ☐ Addition
3.2 NAME **AUSMUS ELAINE**
3.3 STREET ADDRESS **13147 SUBURBAN TERRACE**
3.4 CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE **TD** ☐ DELETE
NAME **MOSES, MIRIAM**
STREET ADDRESS **P.O. BOX 387**
CITY-ST-ZIP **GROVELAND FL 34738**

4.1 TITLE **IN PROGRESS** ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **LAMPER, LUCY**
STREET ADDRESS **261 EDGEWATER DRIVE**
CITY-ST-ZIP **CLERMONT F; 34712**

5.1 TITLE **D** ☐ Change ☐ Addition
5.2 NAME **LAMPER LUCY**
5.3 STREET ADDRESS **261 EDGEWATER DR**
5.4 CITY-ST-ZIP **CLERMONT FL 34712**

TITLE **D** ☐ DELETE
NAME **MOSES, MARION**
STREET ADDRESS **P.O. BOX 387**
CITY-ST-ZIP **GROVELAND FL 34712**

6.1 TITLE **D** ☐ Change ☐ Addition
6.2 NAME **DAVIS NANCY**
6.3 STREET ADDRESS **2345 BABIN ST**
6.4 CITY-ST-ZIP **CLERMONT FL 34711**

14. 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 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:

Joseph T. Waters

1/21/98 352-394-5164

CP2E037 (10/97)