

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002265

FILED
Mar 27, 2012
Secretary of State

Entity Name: COMMUNITY AIDS NETWORK FOUNDATION, INC.

Current Principal Place of Business:

1231 TUTTLE AVENUE N
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

1231 TUTTLE AVENUE N
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 57-1169496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKWOOD, JENNIFER W
1231 TUTTLE AVENUE N
SARASOTA, FL 34237 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: CHAI
Name: SCHAYE, ED
Address: 3449 WINDING OAKS DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: BOD
Name: STRASSER, ROBERT
Address: 3810 OAKLEY GREEN
City-St-Zip: SARASOTA, FL 34235

Title: BOD
Name: LIND, LESLIE CPA
Address: 2310 GOLDEN ROD ST.
City-St-Zip: SARASOTA, FL 34239

Title: BOD
Name: BLOOM, DAVID
Address: 5361 DOMINCA CIRCLE
City-St-Zip: SARASOTA, FL 34233

Title: CFO
Name: LOCKWOOD, JENNIFER W
Address: 1231 TUTTLE AVENUE N
City-St-Zip: SARASOTA, FL 34237

Title: CEO
Name: CUFFAGE, MICHAEL W
Address: 1231 TUTTLE AVENUE N
City-St-Zip: SARASOTA, FL 34237

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER W. LOCKWOOD

CFO

03/27/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date