FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -9 AM 9:19

DOCUMENT # N32187 (9)

1. Corporation Name
PEOPLE WITH AIDS COALITION OF DADE COUNTY, INC.

Principal Place of Business	Mailing Address
3890 BISCAYNE BLVD. MIAMI FL 33137 US	3890 BISCAYNE BLVD. MIAMI FL 33137 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/09/1989
3a. Date of Last Report: 03/29/1994
4. FEI Number: 65-0203093 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HUTCHISON, CHARLES LAMAR
800 W. AVE.
SUITE 744
MIAMI FL 33137 33140
Beach

10. Name and Address of New Registered Agent

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City FL 65 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☒ Change ☐ Addition D
NAME	HUTCHISON, CHARLES L.	1.2 NAME	David J. Birmingham
STREET ADDRESS	800 WEST AVE., SUITE 744	1.3 STREET ADDRESS	10025 Biscayne Blvd.
CITY-ST-ZIP	MIAMI BCH. FL 33140	1.4 CITY-ST-ZIP	Miami Shores, FL 33138
TITLE	VPD & Treasurer	2.1 TITLE	☒ Change ☐ Addition D
NAME	SHAFOR, STEVE	2.2 NAME	Scotty Buchanan
STREET ADDRESS	656 NE 125TH ST.	2.3 STREET ADDRESS	951 N.E. 140th St.
CITY-ST-ZIP	N. MIAMI FL 33161	2.4 CITY-ST-ZIP	N. Miami, FL 33161
TITLE	SD	3.1 TITLE	☒ Change ☐ Addition D
NAME	David A. Trussell	3.2 NAME	Donald Davie
STREET ADDRESS	458 NW 4th	3.3 STREET ADDRESS	522 N.E. 34th St., #1
CITY-ST-ZIP	MIAMI FL 33128 St.,#101	3.4 CITY-ST-ZIP	Miami, FL 33137
TITLE	TD	4.1 TITLE	☒ Change ☐ Addition D
NAME		4.2 NAME	Fidel Mata
STREET ADDRESS		4.3 STREET ADDRESS	301 N.W. Boulevard
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami, FL 33126
TITLE	D	5.1 TITLE	☒ Change ☐ Addition D
NAME		5.2 NAME	Edna Wellington
STREET ADDRESS		5.3 STREET ADDRESS	44 N.W. 40th St.
CITY-ST-ZIP	CORAL GABLES FL	5.4 CITY-ST-ZIP	Miami, FL 33127
TITLE	D	6.1 TITLE	☒ Change ☐ Addition D
NAME		6.2 NAME	J.D. Ramsay
STREET ADDRESS		6.3 STREET ADDRESS	3090 Biscayne Blvd Miami 33137
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption found 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: David A. Trussell David A. Trussell, Secretary, March 2, 1995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

(305) 573-6010
Daytime Phone #

0037807