

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 8:00 am
Secretary of State

01-19-2006 90074 038 ****61.25

DOCUMENT # N34517 1. Entity Name ISLAND COAST AIDS NETWORK, INC.					
Principal Place of Business 2231-B MCGREGOR BLVD. FT. MYERS, FL 33901 US			Mailing Address 2231-B MCGREGOR BLVD FT MYERS, FL 33901 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
01102006 Chg-NP CR2E037 (11/05)					
4. FEI Number 65-0147957				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
8. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MOORE, CAROLYN L 2231 MCGREGOR FT. MYERS, FL 33901			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 01/12/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TILLEY, TERRY 16848 COLONYLAKES BLVD FORT MYERS, FL 33901	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Blancett, Stephen 17425 Fuchsia Rd Fort Myers, FL 33912	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SPENCER, JENNIFER 4450 OAK COAST LANE FORT MYERS, FL 33905	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOPEZ, JOHN 12671 WHITEHAN DRIVE FORT MYERS, FL 33907	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Lopez, John 12671 Whitehall Dr Fort Myers, FL 33907	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRAY-BLANCETT, STEPHEN 17425 FUCHSIA ROAD FORT MYERS, FL 33912	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HALL, TERRY 1415 Bayview Ct Fort Myers, FL 33901	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:			01/12/06 239.337.9056 K222		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		