2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2010
Secretary of State

DOCUMENT# N34517

Entity Name: ISLAND COAST AIDS NETWORK, INC.

Current Principal Place of Business:

2231-B MCGREGOR BLVD.
FT. MYERS, FL 33901 US

New Principal Place of Business:

2231 MCGREGOR BLVD.
FT. MYERS, FL 33901 US

Current Mailing Address:

2231-B MCGREGOR BLVD
FT MYERS, FL 33901 US

New Mailing Address:

2231 MCGREGOR BLVD
FT MYERS, FL 33901 US

FEI Number: 65-0147957 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, CAROLYN L
2231 MCGREGOR
FT. MYERS, FL 33901 US

Name and Address of New Registered Agent:

MOORE, CAROLYN L ED
2231 MCGREGOR
FT. MYERS, FL 33901 US

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: CAROLYN L MOORE 01/06/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T
Name: LOPEZ, JOHN
Address: 12671 WHITEHALL DR
City-St-Zip: FORT MYERS, FL 33907

Title: P
Name: VICE, ROBERT
Address: 1666 LLEWELLYN DRIVE
City-St-Zip: FORT MYERS, FL 33901

Title: VP
Name: RUTHSATZ, CRAIG
Address: 22374 FOUNTAIN LAKES
City-St-Zip: ESTERO, FL 33928

Title: S
Name: MARTIN, JOHN
Address: 945 ROBALO DR
City-St-Zip: FORT MYERS, FL 33919

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: CAROLYN L MOORE ED 01/06/2010
Electronic Signature of Signing Officer or Director Date