2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2011
Secretary of State

DOCUMENT# N34517

Entity Name: ISLAND COAST AIDS NETWORK, INC.

Current Principal Place of Business:

2231 MCGREGOR BLVD.
FT. MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

2231 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 ED
2231 MCGREGOR
FT. MYERS, FL 33901 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: T
Name: HODGES, ELIZABETH
Address: 8703 LAKEFRONT COURT
City-St-Zip: FORT MYERS, FL 33908

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

Title: VP
Name: KOLESAR, EDWARD
Address: 5765 MANGO CIRCLE
City-St-Zip: NAPLES, FL 34110

Title: S
Name: HARRIS-SCHUTZ, SHELIA
Address: 455 PALM CIRCE EAST
City-St-Zip: NAPLES, FL 34102

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 02/10/2011
Electronic Signature of Signing Officer or Director Date