2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2011
Secretary of State

DOCUMENT# N93000002781

Entity Name: AIDS ORPHANS AND STREET CHILDREN, INC.

Current Principal Place of Business:

865 E. HALL RD
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

865 E. HALL RD
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 59-3210045 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BLAND, ROBERT M
865 E HALL RD
MERRITT ISLAND, FL 32953 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: P
Name: BLAND, ROBERT M
Address: 885 E HALL RD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: V
Name: VANDERPOOL, KATHERINE S
Address: 885 E HALL RD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: ST
Name: DOOMS, TAMI L
Address: 885 E HALL RD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D
Name: BLAND, BERNICE M
Address: 885 E HALL RD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D
Name: DOOMS, GEORGE H
Address: 885 E HALL RD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D
Name: LITTLE, ELIZABETH
Address: 885 E HALL RD
City-St-Zip: MERRITT ISLAND, FL 32953

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: ROBERT M BLAND P 04/30/2011

Electronic Signature of Signing Officer or Director — Date