

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003201

Entity Name: AMERICAN FOUNDATION FOR CHILDREN WITH AIDS, INC.

Current Principal Place of Business:

6221 BLUE GRASS AVE
HARRISBURG, PA 17112

Current Mailing Address:

6221 BLUE GRASS AVE
HARRISBURG, PA 17112

FEI Number: 30-0247823

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC
11680 PROSPERITY FARMS ROAD
SUITE 221E
PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name ENGELKING, MARY
Address 501 N BROOKLINE DRIVE
City-State-Zip: COLUMBIA MO 65203

Title VP
Name MAYNARD, ROBERT
Address P O BOX 1147
City-State-Zip: LAWRENCE KS 66074

Title T
Name WILLIAM, GARBARINO
Address 1790 D'AMOUR CRESCENT
City-State-Zip: ORELEANS K1C 5-G1

Title S
Name KRACHT, MICHAEL
Address 847 WEST MARKET STREET
City-State-Zip: PERKASIE PA 18944

Title P
Name CASSINO, NICHOLAS
Address 6436 N. VIEWRIDGE DR.
City-State-Zip: TACOMA WA 98407

Title ED
Name TANYA, WEAVER
Address 6221 BLUE GRASS AVENUE
City-State-Zip: HARRISBURG PA 17112

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: TANYA WEAVER

EXECUTIVE DIRECTOR

05/15/2014

Electronic Signature of Signing Officer/Director Detail

Date