

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26257

Entity Name: AIDS COALITION OF THE GLADES, INC.

Current Principal Place of Business:

673 SE 6TH STREET
BELLE GLADE, FL 33430

Current Mailing Address:

P O BOX 1128
BELLE GLADE, FL 33430

FEI Number: 65-0154615

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MONTGOMERY, THOMAS
1 SE ML KING JR BLVD
BELLE GLADE, FL 33430 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 P
Name STEWART, SANDRA D
Address 673 SE 6TH STREET
City-State-Zip: BELLE GLADE FL 33430

Title VP
Name VEREEN, JULIA T
Address 648 S. W. 3RD STREET
City-State-Zip: BELLE GLADE FL 33430

Title SECRETARY
Name SINGLETARY, ELSIE L.
Address P O BOX 1128
City-State-Zip: BELLE GLADE FL 33430

Title ASEC
Name GORDON, BRENDA
Address POST OFFICE BOX 1128
City-State-Zip: BELLE GLADE FL 33430

Title TREA
Name KING, PEGGY
Address P O BOX 2072
City-State-Zip: BELLE GLADE FL 33430

Title ATRE
Name TERRY , JESSIE P.
Address 1138 SINATA WAY
City-State-Zip: ROYAL PALM BEACH FL 33411

Title PARLIAMENTARIAN
Name RHODES, EDDIE L
Address 732 S, W, 14TH STREET
City-State-Zip: BELLE GLADE FL 33430

Title HISTORIAN
Name VACANT, OFFICE
Address P. O. BOX 1128
City-State-Zip: BELLE GLADE FL 33430

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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: SANDRA D. STEWART

PRESIDENT

06/10/2020

Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title CHAPLIN
Name JONES, ETHA
Address 1216 S. W. AVENUE B
City-State-Zip: BELLE GLADE FL 33430

Title MEMBER
Name BAIN, JANICE
Address 133 N. W. 11TH STREET
City-State-Zip: BELLE GLADE FL 33430

Title FOUNDER
Name JOHNSON, HENRIETTA
Address P. O. BOX 440
City-State-Zip: PAHOKEE FL 33476

Title MEMBER
Name MORELAND, JANET
Address P. O BOX 1128.
City-State-Zip: BELLE GLADE FL 33430

Title MEMBER
Name WHITE, DEBORAH
Address 800 N. W. 39TH AVENUE
City-State-Zip: DELRAY BEACH FL 33445

Title MEMBER
Name BIGGS, ALLIE H
Address 1547 REV. JESSIE BIGGS BLVD
City-State-Zip: PAHOKEE FL 33476

Title MEMBER
Name BROWN, KEVIN
Address P O BOX 2031
City-State-Zip: BELLE GLADE FL 33430

Title OTHER
Name DHORAY, WANDA
Address P O BOX 1128
City-State-Zip: BELLE GLADE FL 33430

Title MEMBER
Name SMITH, DARIAL SR.
Address 900 S. W. 10TH STREET
City-State-Zip: BELLE GLADE FL 33430

Title MEMBER
Name WILLIAMS, MONICA
Address P. O. BOX 1365
City-State-Zip: INDIANTOWN FL 34956

Title MEMBER
Name SMITH, GERALD
Address 1025 WEDGEWORTH ROAD
City-State-Zip: BELLE GLADE FL 33430

Title MEMBER
Name CLARK, NADINE
Address 796 HILL DRIVE, UNIT C
City-State-Zip: WEST PAL BEACH FL 33415

Title MEMBER
Name SMITH, L'LOREN
Address P O BOX 1128
City-State-Zip: BELLE GLADE FL 33430

Title MEMBER AT LARGE
Name BROWN, EARNESTINE
Address 301 N. W. 10TH STREET
City-State-Zip: BELLE GLADE FL 33430

Title FOUNDER
Name JOHNSON, HENRIETTA
Address P O BOX 440
City-State-Zip: PAHOKEE FL 33476

Title OTHER
Name TEMPLE, LEROY MINISTER
Address 4849 SABLE PINE CIRCLE C-1
City-State-Zip: WEST PALM BEACH, FL 33417