

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26257

**FILED**  
**Apr 03, 2016**  
**Secretary of State**  
**CC2582979166**

**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 ST  
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 SEC  
Name SMITH, L'LOREN D.  
Address 1025 WEDGE WORTH ROAD  
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 ALLEN, LETHIA  
Address P O BOX 1128  
City-State-Zip: BELLE GLADE FL 33430

**Continues on page 2**

*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 DANIELS STEWART

**PRESIDENT**

**04/03/2016**

\_\_\_\_\_  
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            MEMBER  
Name            RHODES, EDDIE LEE  
Address        732 S. W. 14TH STREET  
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