2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001216

Entity Name: AIDS HEALTHCARE FOUNDATION, INC.

FILED Feb 26, 2024 Secretary of State 9029911587CC

Current Principal Place of Business:

700 SE THIRD AVENUE. 4TH FLOOR

FORT LAUDERDALE, FL 33316

Current Mailing Address:

6255 W. SUNSET BLVD., 21ST FLOOR LOS ANGELES, CA 90028 US

FEI Number: 95-4112121 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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 DIRECTOR Title **DIRECTOR**

Name BONDS, CURLEY LEE II Name WRIGHT, RODNEY LORNE

Address 6255 W. SUNSET BLVD., 21ST FLOOR Address 6255 W SUNSET BLVD

21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028 LOS ANGELES CA 90028 City-State-Zip:

Title Title Τ

WEINSTEIN, MICHAEL Name CARLTON, STEVE Name

Address 6255 W. SUNSET BLVD, 21ST FLOOR Address 6255 W SUNSET BLVD.

21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028 LOS ANGELES CA 90028 City-State-Zip:

VΡ Title

City-State-Zip:

Title CHIEF FINANCIAL REIS, PETER Name

OFFICER/FINANCIAL SERVICES AND

COMPLIANCE

Address 6255 W. SUNSET BLVD. 21ST FLOOR Name HONIG, LYLE H

> 6255 W. SUNET BLVD., 21ST FLOOR Address

City-State-Zip: LOS ANGELES CA 90028 Title **CHAIRMAN**

Name ARROYO, WILLIAM

LOS ANGELES CA 90028

Title **SECRETARY** Address 6255 W. SUNSET BLVD., 21ST FLOOR

Name CURLEY, CONDESSA M.

Address 6255 W. SUNSET BLVD., 21ST FLOOR City-State-Zip: LOS ANGELES CA 90028

> City-State-Zip: LOS ANGELES CA 90028

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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.

02/26/2024 SIGNATURE: MICHAEL WEINSTEIN **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name DAVIS, CYNTHIA CALLAHAN

Address 6255 W. SUNSET BLVD., 21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028

Title DIRECTOR

Name GALVIN, SCOTT

Address 6255 W. SUNSET BLVD., 21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028

Title DIRECTOR

Name WAPAKHABULO, ANGELINA

Address 6255 W. SUNSET BLVD., 21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028

Title DIRECTOR

Name RUIZ, ALBERT

Address 6255 W. SUNSET BLVD. 21ST F

City-State-Zip: LOS ANGELES CA 90028

Title DIRECTOR

Name DIAZ, AGAPITO

Address 6255 W. SUNSET BLVD., 21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028

Title DIRECTOR

Name HOORZUK, DIANA GLORIA

Address 6255 W. SUNSET BLVD., 21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028

Title DIRECTOR

Name WILLIAMS, ANITA ANN

Address 6255 W. SUNSET BLVD., 21ST FLOOR

City-State-Zip: LOS ANGELES CA 90028

Title DIRECTOR

Name HOPKINS, JAMMIE HEALTHCARE

Address 6255 W. SUNSET BLVD. 21ST F

City-State-Zip: LOS ANGELES CA 90028