2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 15, 2004 8:00 am Secretary of State DOCUMENT # F99000001216 1. Entity Name 04-15-2004 90008 024 ****61.25 AIDS HEALTHCARE FOUNDATION, INC. Principal Place of Business Mailing Address 6255 W. SUNET BLVD., 21ST FLOOR 6255 W. SUNET BLVD., 21ST FLOOR LOS ANGELES CA 90028 LOS ANGELES CA 90028 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 95-4112121 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EUGENE, BUNDROCK RN Street Address (P.O. Box Number is Not Acceptable) 110 SE 6TH ST STE 1960 FORT LAUDERDALE FL 33301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent: (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Delete ☐ Change ☐ Addition LAURENT, FISCHER NAME NAME 3393 28TH ST. STREET ADDRESS STREET ADDRESS SAN DIEGO CA 92104 CITY-ST-ZIP CITY-ST-ZIP Delete. VICE CHAIR Change Change ☐ Addition TITLE ALBERTSON, WALLACE NAME NAME ALBERTSON 1618 SUNSET PLAZA DR STREET ADDRESS 1618 SUNSET STREET ADDRESS LOS ANGELES CA 90069 CiTY-ST-7IP CITY-ST-71P CHAIRPERSON DILE TITLE Change ☐ Addition Delete SCHULTE, STEVEN NAME NAME 6255 W SUNSET BLVD #2100 STREET ADDRESS STREET ADDRESS 211 SO. AUE LOS ANGELES CA 90028 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE ☐ Change DIAZ, AGAPITO NAME NAME 3995 PROSPECT AVE STREET ADDRESS STREET ADDRESS LOS ANGELES CA 90027 CITY-ST-ZIP CITY-ST-ZIP BT? F ☐ Delete TITLE ☐ Change ☐ Addition WEINSTEIN, MICHAEL NAME NAME 6255 W. SUNSET BLVD, 21ST FLOOR STREET ADDRESS STREET ADDRESS LOS ANGELES CA 90028 CITY-ST-7(P CITY-ST-7IP ППЕ Addition ☐ Delete TITE □ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

MICHAEL WEINSTEIN 4-1-04

FILED