

2002 UNIFORM BUSINESS REPORT (UBR)

4/4/1

FILED
Jun 18, 2002 8:00 am
Secretary of State

04-04-2002 90017 041 ****70.00

DOCUMENT # N01000002530

1. Entity Name

FLORIDA'S HIV/AIDS MINISTRIES, INC.

Principal Place of Business

Mailing Address

700 S ROYAL POINCIANA BLVD. STE 401
 MIAMI FL 33168

700 S ROYAL POINCIANA BLVD. STE 401
 MIAMI FL 33168

2. Principal Place of Business

1230 NW 79th Street

3. Mailing Address

1230 NW 79th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-1098103

Applied For

Not Applicable

Zip

33147

Country

USA

Zip

33147

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MINCEY, JUANITA
 2527 OPA LOCKA BLVD
 OPA LOCKA FL 33054

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

JUANITA MINCEY

3/27/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	HARDY, MARILYN L REV.	
STREET ADDRESS	245 NW 8TH STREET	
CITY-ST-ZIP	MIAMI FL 33138	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CLARKE, ELNORA	
STREET ADDRESS	PO BOX 56-2141	
CITY-ST-ZIP	MIAMI FL 33256-2141	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JAMES, ROBERT DR.	
STREET ADDRESS	700 S ROYAL POINCIANA BLVD, STE 401	
CITY-ST-ZIP	MIAMI FL 33168	
TITLE	P	<input type="checkbox"/> Delete
NAME	BAILEY, WILLIE J REV.	
STREET ADDRESS	1930-W. BAY DR. #3	
CITY-ST-ZIP	MIAMI BEACH FL 33141	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	NELSON, WILLIE J	
STREET ADDRESS	3770 NW 197 ST	
CITY-ST-ZIP	OPA LOCKA FL 33055	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	HARDY, PRICETON	
STREET ADDRESS	8050 NW 22 AVENUE	
CITY-ST-ZIP	MIAMI FL 33054	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TREASURER - D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OMANE, BISMARCK	
STREET ADDRESS	19538' NW 50 COURT	
CITY-ST-ZIP	MIAMI, FL 33055	
TITLE	SECRETARY - D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TALLEY, MARIE	
STREET ADDRESS	PO BOX 470674	
CITY-ST-ZIP	MIAMI, FL 33247-0674	
TITLE	PRESIDENT - D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAILEY, WILLIE J. REV.	
STREET ADDRESS	7801 NE 4th COURT STE 506	
CITY-ST-ZIP	MIAMI, FL 33138	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARDY, MARILYN L. REV.	
STREET ADDRESS	464 NE 16th STREET	
CITY-ST-ZIP	MIAMI, FL 33132	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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:

Willie J. Bailey
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/02

(305) 693-0820
 DAYTIME PHONE #

CR2E037 (9/01)