

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

FILED
May 10, 2004 8:00 am
Secretary of State

05-10-2004 90482 035 ****61.25

DOCUMENT # N02000003161

1. Entity Name

AIDS PARTNERSHIP, INC.



Principal Place of Business

C/O GOOD AMARITAN CHURCH ANNEX
6085 PARK BLVD N
PINELLAS PARK FL 33781

Mailing Address

PO 5763
CLEARWATER FL 33758

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

01-0718772

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCGUIRE, TERRY J
1071 DONEGAN RD #1437
LARGO FL 33771

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME ~~P~~ FARRELL, KATHLEEN
STREET ADDRESS 316 21ST AVE NE
CITY - ST - ZIP SAINT PETERSBURG FL 33704

TITLE ☐ Delete
NAME D MELARTIN, II, JOHN
STREET ADDRESS 114 145TH AVE E
CITY - ST - ZIP MADEIRA FL 33708

TITLE ☐ Delete
NAME S LINDEMANN, PAM
STREET ADDRESS 2767 ENTERPRISE RD E #73
CITY - ST - ZIP CLEARWATER FL 33759

TITLE ☐ Delete
NAME T DUNN, CAROL
STREET ADDRESS 2101 SUNSET PT RD #201
CITY - ST - ZIP CLEARWATER FL 33765

TITLE ☐ Delete
NAME D BAUER, ELLEN L
STREET ADDRESS 554 WILIE ST
CITY - ST - ZIP DUNEDIN FL 33698

TITLE ☒ Delete
NAME ~~D~~ MEYER, BRAD
STREET ADDRESS 4700 7TH AVENUE
CITY - ST - ZIP ST PETERSBURG FL 33770

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME FARRELL
STREET ADDRESS
CITY - ST - ZIP Correction

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☒ Addition
NAME D JOSEPH MILLER
STREET ADDRESS 306 N JUPITER AVE
CITY - ST - ZIP CLEARWATER, FL 33755

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #