

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003161

FILED
Apr 29, 2010
Secretary of State

Entity Name: AIDS PARTNERSHIP, INC.

Current Principal Place of Business:

AIDS PARTNERSHIP INC.
6085 PARK BLVD, ANNEX
PINELLAS PARK, FL 33781

New Principal Place of Business:

AIDS PARTNERSHIP INC.
407 S SATURN AVE
CLEARWATER, FL 33755

Current Mailing Address:

AIDS PARTNERSHIP INC.
6085 PARK BLVD, ANNEX
PINELLAS PARK, FL 33781

New Mailing Address:

AIDS PARTNERSHIP INC.
407 S SATURN AVE
CLEARWATER, FL 33755

FEI Number: 01-0718772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, JOSEPH
2550 STAG RUN BLVD.
APT. 1013
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

MILLER, JOSEPH
1840 BOUGH AVE
UNIT B
CLEARWATER, FL 33760 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:

04/29/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: DODSON, JOSEPH S
Address: 4235 HELENA ST. NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: ST
Name: DUNN, CAROL
Address: 2101 SUNSET PT RD #201
City-St-Zip: CLEARWATER, FL 33765

Title: VP
Name: BAUER, ELLEN L
Address: 554 WILIE ST
City-St-Zip: DUNEDIN, FL 33698

Title: P
Name: MILLER, JOSEPH
Address: 1840 BOUGH AVE UNIT B
City-St-Zip: CLEARWATER, FL 33760

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: JOSEPH MILLER

PRES

04/29/2010

Electronic Signature of Signing Officer or Director

Date