

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012612

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: THE AIDS FOUNDATION, INC.

## Current Principal Place of Business:

6085 PARK BLVD.  
ANNEX  
PINELLAS PARK, FL 33781

## New Principal Place of Business:

1071 DONEGAN RD.  
1437  
LARGO, FL 33771

## Current Mailing Address:

6085 PARK BLVD.  
ANNEX  
PINELLAS PARK, FL 33781

## New Mailing Address:

P.O.BOX 5223  
LARGO, FL 33779-522

FEI Number: 76-0776454

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MCGUIRE, TERRY J FOUNDER  
Address: 1071 DONEGAN RD. # 1437  
City-St-Zip: LARGO, FL 33771

Title: D ( ) Delete  
Name: RODWICK, BARRY M M.D.  
Address: 3150 STATE RD. 580, SUITE 1  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D ( ) Delete  
Name: MAHER, DIANE  
Address: 1509 ADAMS CIRCLE EAST  
City-St-Zip: LARGO, FL 33771

Title: D ( ) Delete  
Name: PAQUETTE, ANDREW  
Address: 2918 DREW ST. # 225  
City-St-Zip: CLEARWATER, FL 33759

Title: D ( ) Delete  
Name: DEMULL, ARLEAN  
Address: 13168 111TH LANE NORTH  
City-St-Zip: LARGO, FL 33778

Title: D ( ) Delete  
Name: REYNOLDS, ROBERT  
Address: 809 W. 124TH AVE.  
City-St-Zip: TAMPA, FL 33612

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY J. MCGUIRE

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date