

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004495

FILED
Apr 20, 2011
Secretary of State

Entity Name: PUTNAM COUNTY FAITH-BASED HIV/AIDS COALITION, INC.

Current Principal Place of Business:

800 MADISON ST.
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 253
PALATKA, FL 32178

New Mailing Address:

108 SE 13TH LANE
GAINESVILLE, FL 32601

FEI Number: 26-2677442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCRAE-GARRISON, STEPHANIE
108 SE 13TH LANE
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

MCRAE-ROBINSON, STEPHANIE
108 SE 13TH LANE
GAINESVILLE, FL 32601 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: STEPHANIE MCRAE-ROBINSON

04/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MCRAE-ROBINSON, STEPHANIE
Address: 108 SE 13TH LANE
City-St-Zip: GAINESVILLE, FL 32601

Title: VP
Name: WILLIAMS, JONATHAN
Address: 211 STILLWELL AVE.
City-St-Zip: PALATKA, FL 32177

Title: S
Name: REMBERT, BEATRICE
Address: 1011 OLD GAINESVILLE HWY.
City-St-Zip: INTERLACHEN, FL 32148

Title: T
Name: EUBANKS, SHIRLEY
Address: 2819 PETERS ST.
City-St-Zip: PALATKA, FL 32177

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: STEPHANIE MCRAE-ROBINSON

P

04/20/2011

Electronic Signature of Signing Officer or Director

Date