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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N23648**

1. Corporation Name

OCALA-MARION COUNTY COMMUNITY AIDS NETWORK, INC.

235772 - 90131 - 6

Principal Place of Business	Mailing Address
1012 E SILVER SPRINGS BLVD SUITE E OCALA FL 34470 US	1012 E SILVER SPRINGS BLVD SUITE E OCALA FL 34470 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21 -	26	11/30/1987
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2911265 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☒ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

CLICK, BARBARA J
7827 NE 310TH AVE
SALT SPRINGS FL 32134

10. Name and Address of New Registered Agent

81 Name: Helen R. Bunch
82 Street Address (P.O. Box Number is Not Acceptable): 2145 NE 45th Ave
83
84 City: Ocala FL 85 Zip Code: 34470

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Helen R. Bunch — Signature, typed or printed name of registered agent and title if applicable. Helen R. Bunch (NOTE: Registered Agent signature required when reinstating) DATE: 1/19/99

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	ED	☒ DELETE	1.1 TITLE	President	☒ Change ☐ Addition
NAME	COIN, BOBBY J		1.2 NAME	Helen R. Bunch	
STREET ADDRESS	5449 NW 2ND ST		1.3 STREET ADDRESS	2145 NE 45th Ave	
CITY-ST-ZIP	OCALA FL		1.4 CITY-ST-ZIP	Ocala, FL 34470	
TITLE	P	☒ DELETE	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	CLICK, BARBARA		2.2 NAME	Terry Smartt	
STREET ADDRESS	7827 NE 310TH AVE		2.3 STREET ADDRESS	933 SW 3rd Ct	
CITY-ST-ZIP	FT MCCOY FL 32134		2.4 CITY-ST-ZIP	Ocala, FL 34476	
TITLE	VP	☒ DELETE	3.1 TITLE	Secretary	☒ Change ☐ Addition
NAME	ANDREWS, GOULEY		3.2 NAME	Sarah Wilson	
STREET ADDRESS	P.O. BOX 753 N/A		3.3 STREET ADDRESS	1422 E Silver Springs Blvd #7	
CITY-ST-ZIP	OCALA FL 34481		3.4 CITY-ST-ZIP	Ocala, FL 34470	
TITLE	VP	☒ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME	GALLAGHER, VICKI		4.2 NAME	Elza Brea	
STREET ADDRESS	P.O. BOX 369		4.3 STREET ADDRESS	2213 NE 45th Ave	
CITY-ST-ZIP	SPARR FL 32192		4.4 CITY-ST-ZIP	Ocala, FL 34470	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SHUMAN, GLENN		5.2 NAME		
STREET ADDRESS	20 S MAGNOLIA AVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	OCALA FL		5.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HALE, ISABELLE		6.2 NAME		
STREET ADDRESS	719 SE 12TH STREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	SUMMERFIELD FL 34471		6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Helen R. Bunch — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 1/19/99 — Daytime Phone #: 352-347-6190

CR2E037 (11/98)

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N23648

Ocala/Marion County Community AIDS Network
Additional 1999 Directors

Norval Bunch
2145 NE 45th Avenue
Ocala, FL 34470
352-236-6023

Barbara Click
7827 NE 310th Ave.
Fort McCoy, FL 32134
352-685-0720

Peter Medina
P.O. Box 119
Summerfield, FL 34492
352-347-7665

Melanie Owen
13840 SE 25th Avenue
Summerfield, FL 34491
352-307-2033

Darrel Sloan
13756 SE 51st St.
Summerfield, FL 34491
352-347-3795

Vera Tillman
837 NW 8th Avenue
Ocala, FL 34474
401-9256

Richard Wilson
1422 E. Silver Springs Blvd.
#7
Ocala, FL 34470

Bob Cook
1433 NW 1st Avenue
Ocala, FL 34479
352-369-9245