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Apr 03 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N47662 (4)

1. Corporation Name

CHARLOTTE HIV/AIDS NETWORK INC.

Principal Place of Business

Mailing Address

3880 E TAMiami TRAIL
PORT CHARLOTTE F 33952
US

P.O. BOX 4228
PORT CHARLOTTE FL 33949-4228



3. Date Incorporated or Qualified

03/02/1992

4. FEI Number

65-0324748

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 26 27 28 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILSON, DAVID P.
22281 BUFFALO AVE
PORT CHARLOTTE FL 33952-7218

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME OWENS, GAIL
STREET ADDRESS 1031 W RETTA ESPL. #122
CITY-ST-ZIP PUNTA GORDA FL 33950

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME KELLER, JEFFREY
STREET ADDRESS 22281 BUFFALO AVE
CITY-ST-ZIP PORT CHARLOTTE FL 33952-7218

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME WESCOTT, JAMES
STREET ADDRESS 23350 LEHIGH AVE
CITY-ST-ZIP PORT CHARLOTTE FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME Kenneth L. Walsh
3.3 STREET ADDRESS 3009 Calvin Blvd.
3.4 CITY-ST-ZIP Ft. Myers, FL 33901

TITLE ☐ DELETE
NAME MCDOUGALL, ELOISE
STREET ADDRESS 317 W VIRGINIA AVE
CITY-ST-ZIP PUNTA GORDA FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME TURNER, NANCY L
STREET ADDRESS 23725 GUAPORE DR
CITY-ST-ZIP PUNTA GORDA FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME MCGINNIS, SHANNON
STREET ADDRESS 22158 GATEWOOD AVE
CITY-ST-ZIP PORT CHARLOTTE FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE:

Jeffrey L. Keller

Jeffrey L. Keller

March 31, 1998

CR2E037 (10/97)

The following are additional Directors of the Charlotte HIV/AIDS Network
Inc. - N47662

VP - Ceil Fowler
1133 Kensington Street
Port Charlotte, FL 33952

D- Clayton Cable
146 Revere Street
Port Charlotte, FL 33952

D- James Nabors
21850 Edgewater Drive
Port Charlotte, FL 33952

D - Anthony M. Podolak
21515 Bancroft Avenue
Port Charlotte, FL 33954

D- Nancy Razvoza
20377 Quesada Ave.
Port Charlotte, FL 33952