

FILE NOW: FILING FEE IS \$61.25

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Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N50912 (7) 1. Corporation Name FLORIDA AIDS ACTION COUNCIL, INC.			
Principal Place of Business 1817 BAYWOOD DR SARASOTA FL 34231 US		Mailing Address 1817 BAYWOOD DR SARASOTA FL 34231-4714 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country 28	
3. Date Incorporated or Qualified 09/17/1992		3a. Date of Last Report 04/05/1996	
4. FEI Number 65-0380952		Applied For Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent NRANNAN, JOHN 14550 BRUCE B. DOWNS BLVD. SUITE 66 TAMPA FL 33613		10. Name and Address of New Registered Agent 81 Name GRANNAN, JOHN 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 reappointing) DATE			
12. OFFICERS AND DIRECTORS			
TITLE	DP	☐ DELETE	
NAME	UITENBOSCH, PETER		
STREET ADDRESS	1817 BAYWOOD DR.		
CITY-ST-ZIP	SARASOTA FL		
TITLE	D	☐ DELETE	
NAME	GRANNAN, JOHN		
STREET ADDRESS	14550 BRUCE B. DOWNS BLVD., SUITE 66		
CITY-ST-ZIP	TAMPA FL		
TITLE	D	☒ DELETE	
NAME	ARONS, PAUL		
STREET ADDRESS	1706 BEECH WOOD CIR.		
CITY-ST-ZIP	TALLAHASSEE FL		
TITLE	D	☒ DELETE	
NAME	BUEL, RANDY		
STREET ADDRESS	1420 NW 40TH TERR.		
CITY-ST-ZIP	GAINESVILLE FL		
TITLE	D	☐ DELETE	
NAME	AVENDANO, ALBERTO		
STREET ADDRESS	2121 N BAYSHORE RD		
CITY-ST-ZIP	MIAMI FL		
TITLE	D	☐ DELETE	
NAME	FERRER, LUIGI		
STREET ADDRESS	6700 SW 52 ST		
CITY-ST-ZIP	MIAMI FL		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	D	☐ Change ☒ Addition	
1.2 NAME	Andrews, Stanley B.		
1.3 STREET ADDRESS	9805 Alaska Circle		
1.4 CITY-ST-ZIP	Boca Raton, FL 33434		
2.1 TITLE	D	☐ Change ☒ Addition	
2.2 NAME	BROWN, Ronald R.		
2.3 STREET ADDRESS	2629 W. 10th St.		
2.4 CITY-ST-ZIP	Panama City, FL 32401		
3.1 TITLE	D	☐ Change ☒ Addition	
3.2 NAME	Leitch, Lisa		
3.3 STREET ADDRESS	2118 6th St.		
3.4 CITY-ST-ZIP	Sarasota, FL 34237		
4.1 TITLE	D	☐ Change ☒ Addition	
4.2 NAME	Watson, Wilburt		
4.3 STREET ADDRESS	2925 Lafayette		
4.4 CITY-ST-ZIP	St. Myers, FL 33916		
5.1 TITLE		☐ Change ☐ Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		☐ Change ☐ Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			
14. I do 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 or 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: <u>Peter Uitenbosch</u> 4-7-97 941-922-9286			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CP2E037 (9/96)