

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # N96000002426	
1. Entity Name LAVERN WRIGHT AIDS CORPORATION	

Principal Place of Business 2215 - 13 STREET WEST COTTAGE A BRADENTON FL 34205 US	Mailing Address 2215 - 13TH STREET WEST BRADENTON FL 34205
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/05)

4. FEI Number 31-1465798	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SIMMONS, DELOUIS 2215 - 13TH STREET WEST BRADENTON FL 34205

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW: FEE IS \$81.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C LAUSMAN, WALTER A 39824 MAGNOLIA ST LADY LAKE FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, CHARLIE 1418-45TH CIR W APT101 BRADENTON FL 34205 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMMONS, DELOUIS 2915 13 TH ST W BRADENTON FL 34205 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NCD GLASSCOCK, EDWINA 3503 5TH AVE W PALMETTO FL 34221 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CLARK, MELINDA 1004 45TH ST E BRADENTON FL 34208 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAYES, DONNA 1607 18TH ST E PALMETTO FL 34221 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition UN00001454620 03/15/06-80022-024 70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.