

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jun 01, 2001 08:00 AM****Secretary of State****DOCUMENT # N96000004385**1. Entity Name
EPISCOPAL AIDS MINISTRY, INC.

Principal Place of Business	Mailing Address
464 N.E. 16 STREET MIAMI FL 33132	464 N.E. 16 STREET MIAMI FL 33132

2. Principal Place of Business
Suite, Apt. #, etc.3. Mailing Address
Suite, Apt. #, etc.

City & State	City & State	4. FEI Number	Applied For
Zip Country	Zip Country	65-0692341	Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SNIDER GARY L 777 BRICKELL AVE #900 MIAMI FL 33132 US	Name ANDERSON REV. JERRY R Street Address (P.O. Box Number is Not Acceptable) 464 N.E. 16 STREET City MIAMI FL Zip Code 33132

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.

SIGNATURE **REV. JERRY ANDERSON****06/01/2001**

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		D ABELL JENNIFER 12550 PINE NEEDLE LANE MIAMI FL 33156	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		D HANKIN ERIC 2505 FLAMINGO PLACE MIAMI BEACH FL 33140	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D MADER CHARLES 177 NORTH BAYSHORE DR. 1555 MIAMI FL 33132		D ANDERSON REV. JERRY R 464 N.E. 16 STREET MIAMI FL 33132	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D MALTBY REV L HOWARD 4027 PINE TREE DR MIAMI BEACH FL		D/S STUMP EDWIN 1800 SUNSET HARBOUR, #1607 MIAMI BEACH FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D LEON MARIO 800 W AVE, #911 MIAMI BEACH FL 33139		D/VP HUMPHRIES CHARLES 9127 N.W. FIRST AVENUE MIAMI SHORES FL 33138	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D ROBERTS PHILLIP W 2130 S.W. 22 TERRACE MIAMI FL 33145		D/P LEON MARIO 3232 EMATHLA STREET COCONUT GROVE FL 33133	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: REV. JERRY R. ANDERSON**D****06/01/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)

**JAMES SZUREK
3447 CHASE AVENUE**

MIAMI BEACH, FL 33140

**DR. MICHAEL STARY
7190 S.W. 66 AVENUE**

MIAMI, FL 33143

**REV. FRANK MUNOZ
1801 LUDLAM ROAD**

MIAMI SPRINGS, FL 33166