## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000004385

Entity Name: EPISCOPAL AIDS MINISTRY, INC.

FILED Sep 01, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

464 N.E. 16 STREET MIAMI, FL 33132

**Current Mailing Address: New Mailing Address:** 

464 N.E. 16 STREET MIAMI, FL 33132

FEI Number: 65-0692341 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARDY, MARILYN L REV MACARTHUR, DOUGLAS ESQ. 1000 PONCE DE LEON 464 N.E. 16 STREET MIAMI, FL 33132 SUITE 207 CORAL GABLES, FL 33134 US

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: DOUGLAS MACARTHUR 09/01/2004

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete MARQUEZ-STERLING, GUILLERMO SANDS, BISHOP GEORGE W Name: Name: 3010 DESOTO BLVD Address: 464 NE 16 STREET Address:

City-St-Zip: MIAMI, FL 33134 City-St-Zip: MIAMI, FL 33132

Title: SD ( ) Delete Title: (X) Change ( ) Addition MACARTHUR, DOUGLAS MACARTHUR, DOUGLAS Name: Name:

Address: 1000 PONCE DE LEON Address: 1000 PONCE DE LEON, SUITE 207 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete Title: (X) Change ( ) Addition GARDNER, STEVE Name: MOORE, DONNA Name:

1150 NW 72ND AVE #760 464 NE 16 STREET Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33132

Title: ( ) Delete Title: VPD (X) Change ( ) Addition

Name: HARDY, MARILYN L REV Name: PHILLIPS, JAMES 464 N.E. 16 STREET 464 NE 16 STREET Address: Address: City-St-Zip: MIAMI, FL 33132 City-St-Zip: MIAMI, FL 33132

Title: VPD ( ) Delete Title: (X) Change ( ) Addition

BAEUBREN-CORDON, FLORENCE MACAYA, ALFREDO Name: Name: 710 NE 29TH STREET PH 464 NE 16 STREET Address: Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI, FL 33132

Title: () Delete Title: ( ) Change (X) Addition MARQUEZ-STERLING, GUILLERMO Name: Name:

Address: Address: 464 NE 16 STREET MIAMI, FL 33132 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS MACARTHUR SD 09/01/2004