

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10914

Entity Name: SHO - AIDS, INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

P O BOX 200, FLOCCROFT, PA 19032
3000 HENDERSON DRIVE
SHARON HILL, PA 19079

New Principal Place of Business:

3000 HENDERSON DRIVE
SHARON HILL, PA 19079

Current Mailing Address:

P O BOX 200, FLOCCROFT, PA 19032
3000 HENDERSON DRIVE
SHARON HILL, PA 19079

New Mailing Address:

P O BOX 200
FOLCROFT, PA 19032

FEI Number: 13-5634241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAKLEY, SCOT
380 27TH STREET
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CODAMO, ANGELO,
Address: 407 S. SHARP AVE.
City-St-Zip: GLENOLDEN, PA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CODAMO, ANGELO,
Address: 407 S. SHARP AVE.
City-St-Zip: GLENOLDEN, PA 19036

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. J. CODAMO

PRES

01/28/2009

Electronic Signature of Signing Officer or Director

Date