


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90037 002 ****70.00

DOCUMENT # 704853			
1. Entity Name UNITED WAY OF ST. LUCIE COUNTY, INC.			
Principal Place of Business 4800 SOUTH US HIGHWAY 1 FORT PIERCE FL 34982		Mailing Address 4800 SOUTH US HIGHWAY 1 FORT PIERCE FL 34982	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

34013000



MOORE CR2E037 (11/03)

4. FEI Number 59-6212157	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KNAPP, KAREN 4800 S US #1 FORT PIERCE FL 34982		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		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 \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida 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	PP HANWALT, SCOTT 1555 NW ST LUCIE W BLVD SUITE 101 PORT SAINT LUCIE FL 34986 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PP Pentz, Tom 1700 S 23RD STREET FT. PIERCE, FL 34954 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C PENTZ, TOM 1700 S 23RD STREET FORT PIERCE FL 34954 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Rupert, Diana 300 PEACOCK BLVD Pt. St. Lucie, FL 34986 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC RUPERT, DIANA 300 NW PEACOCK BLVD PORT SAINT LUCIE FL 34986 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC Epsky, Thomas D. 2120 SE WILD MEADOW CIRCLE Pt. St. Lucie, FL 34952 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMPSON, MARSHA 3209 VIRGINIA AVE FORT PIERCE FL 34981 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY THOMPSON, MARSHA 3209 VIRGINIA AVE FT. PIERCE, FL 34981 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, BRAD 247 SE PORT ST LUCIE BLVD PORT SAINT LUCIE FL 34984 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR Apugliese, Lou P.O. Box 9033 STUART, FL 34995 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRISCOLL, MIKE 2222 COLONIAL RD SUITE 100 FORT PIERCE FL 34950 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR Kelly-Brown, Sharon 950 Bayshore Blvd Pt. St. Lucie, FL 34983 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I 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 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: *Karen Knapp* Karen Knapp 1-28-04 (772) 466-5300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

United Way of St. Lucie County, Inc.

Attachment
DH# 704853

Name: Michael J. Brown, Jr. Title: Director
Address: 100 S. 2nd. St
City, State, and Zip: Fort Pierce, FL 34950

Name: Steve Campbell Title: Director
Address: 2750 SW Martin Downs Blvd.
City, State, and Zip: Palm City FL 34990

Name: Denis Corrick Title: Director
Address: 1903 S 25th St.
City, State, and Zip: Ft. Pierce, FL 34947

Name: Harold L. Fenner Title: Director
Address: 13401 Wax Myrtle Trail
City, State, and Zip: Palm City, FL 34990

Name: Linnes Finney Title: Director
Address: PO Box 3390
City, State, and Zip: Ft. Pierce, FL 34948

Name: Jim Fitzgerald Title: Director
Address: 2211 Okeechobee Rd.
City, State, and Zip: Fort Pierce, FL 34950

Name: Philip Flynn, III Title: Director
Address: 140 38th Ct
City, State, and Zip: Vero Beach, Florida 32968

Name: Al Johnson Title: Director
Address: 1127 Forrest Hill Cove
City, State, and Zip: Port St. Lucie, FL 34986

Name: Gail Kavanagh Title: Director
Address: 10930 Kimberfyld Lane
City, State, and Zip: Port St. Lucie, FL 34986

Name: Bob Moyano Title: Director
Address: 3300 Okeechobee Road
City, State, and Zip: Ft. Pierce, FL 34947

Name: Sue-Ellen Sanders Title: Director
Address: 5427 Stately Oaks St.
City, State, and Zip: Fort Pierce, FL. 34981

Name: Paul Taglieri Title: Director
Address: 525 NW Peacock Blvd.
City, State, and Zip: Port St. Lucie, FL 34986

Attachment
R# 704853

Name: Roger Thomas
Address: P.O. Box 1637
City, State, and Zip: Jensen Beach, Fl. 34957

Title: Director

Name: Carol Wyatt
Address: 8245 Business Park Drive
City, State, and Zip: Port St. Lucie, FL 34952

Title: Director