

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710548

FILED
Apr 13, 2009
Secretary of State

Entity Name: UNITED WAY OF CHARLOTTE COUNTY, INC.

Current Principal Place of Business:

17831 MURDOCK CIRCLE
SUITE B
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

17831 MURDOCK CIRCLE
SUITE A
PORT CHARLOTTE, FL 33948

Current Mailing Address:

17831 MURDOCK CIRCLE
SUITE B
PORT CHARLOTTE, FL 33948

New Mailing Address:

17831 MURDOCK CIRCLE
SUITE A
PORT CHARLOTTE, FL 33948

FEI Number: 59-1149995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GLENN, CECY C CEO
17831 MURDOCK CIRCLE
SUITE B
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

GLENN, CECY C CEO
17831 MURDOCK CIRCLE
SUITE A
PORT CHARLOTTE, FL 33948 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:

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: GLENN, CECY C
Address: 17831 MURDOCK CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: P () Delete
Name: SILVERBERG, KATHY
Address: 1617 TAMiami TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: T () Delete
Name: ASHLEY, DON
Address: 366 E. OLYMPIA AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

Title: V () Delete
Name: KLEIN, DAVID
Address: 1600 TAMiami TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Delete
Name: DOYLE, MELISSA
Address: 23046 HARBORVIEW ROAD
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D () Delete
Name: LAND, PATRICIA
Address: 26300 AIRPORT ROAD
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: KLEIN, DAVID
Address: 1600 TAMiami TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: GAYLER, DAVID
Address: 1445 EDUCATION WAY
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SILVERBERG, KATHY
Address: 3589 PENNYROYAL ROAD
City-St-Zip: PORT CHARLOTTE, FL 33953

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CECY GLENN

CEO

04/13/2009

Electronic Signature of Signing Officer or Director

Date