2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004
Secretary of State

DOCUMENT# 715398

Entity Name: UNITED WAY OF SUWANNEE VALLEY, INC.

Current Principal Place of Business:

325 NE HERNANDO AVE.
SUITE 102
LAKE CITY, FL 32055

New Principal Place of Business:

325 NE HERNANDO AVE.
SUITE 102
LAKE CITY, FL 32055 40

Current Mailing Address:

325 NE HERNANDO AVE.
SUITE 102
LAKE CITY, FL 32055

New Mailing Address:

325 NE HERNANDO AVE.
SUITE 102
LAKE CITY, FL 32055 40

FEI Number: 59-1262354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, TOM W
10 COLUMBIA AVE
C-25
LAKE CITY, FL 32055

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LLOYD, VERNON
Address: RT 13 BOX 331-29
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete
Name: LLOYD, MAUREEN
Address: RT 13. BOX 331-29
City-St-Zip: LAKE CITY, FL 32055

Title: P ( ) Delete
Name: WESLEY, SMALL T
Address: P OB OX 2199
City-St-Zip: LAKE CITY, FL 32056

Title: D ( ) Delete
Name: LEWIS, LEE B
Address: 4307 W US HWY 90
City-St-Zip: LAKE CITY, FL 32055

Title: T ( ) Delete
Name: BURLEY, JOHN
Address: 100 N FIRST ST
City-St-Zip: LAKE CITY, FL 32055

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D ( ) Change (X) Addition
Name: JOHN, HOPKINS
Address: 1518 US HWY 90 W
City-St-Zip: LAKE CITY, FL 32055

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: WESLEY T. SMALL P 04/16/2004

Electronic Signature of Signing Officer or Director — Date