2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 02, 2004
Secretary of State

DOCUMENT# 753220

Entity Name: UNITED WAY OF FLORIDA, INC.

Current Principal Place of Business:

307 E. 7TH AVENUE
TALLAHASSEE, FL 323035520

New Principal Place of Business:

Current Mailing Address:

307-B EAST 7TH AVENUE
TALLAHASSEE, FL 323035520

New Mailing Address:

FEI Number: 59-2104175 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRANGER, THEODORE G.
307-B EAST 7TH AVENUE
TALLAHASSEE, FL 32303 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

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: ARMSTRONG, KEN
Address: 307 E. SEVENTH AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: DRY, WALTER
Address: 3418 KNOTTY OAKS CIRCLE
City-St-Zip: SPRING HILL, FL 34606

Title: D ( ) Delete
Name: NOWVISKIE, RON
Address: 275 CLYDE MORRIS BLVD
City-St-Zip: ORMOND BEACH, FL 321745977

Title: D ( ) Delete
Name: FINNEY, MARILYN
Address: 436 MAGNOLIA AVENUE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D ( ) Delete
Name: SHORE, MELANIE
Address: 411 NORTH MAIN
City-St-Zip: GAINESVILLE, FL 32601

Title: STD ( ) Delete
Name: BARRINEAU, DIANE
Address: 1309 S.E. 25 LOOP, STE. 103
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ARMSTRONG, KEN
Address: 307 E. SEVENTH AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: CD (X) Change ( ) Addition
Name: DRY, WALTER
Address: 3418 KNOTTY OAKS CIRCLE
City-St-Zip: SPRING HILL, FL 34606

Title: D (X) Change ( ) Addition
Name: JAMES, TONI
Address: 1401 NE 2ND STREET
City-St-Zip: OCALA, FL 34478

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: KEN ARMSTRONG D 07/02/2004
Electronic Signature of Signing Officer or Director — Date