2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756769

Entity Name: UNITED WAY OF MONROE COUNTY, INC.

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1400 UNITED STREET KEY WEST, FL 33040 **Current Mailing Address: New Mailing Address:** P.O. BOX 2910 KEY WEST, FL 330452910 US FEI Number: 59-1288630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOULDY, SUSAN GOULDY, SUSAN 1400 UNITES STREET 1400 UNITED STREET US US KEY WEST, FL 33040 KEY WEST, FL 33040 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: 01/06/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition YAHN, DANNY Name: Name: 2945 GROUPER DRIVE Address: Address: City-St-Zip: MARATHON, FL 33050 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: WAYNE, MARKHAM Name: WAYNE, MARKHAM Address: PO BOX 50158 Address: PO BOX 50158 City-St-Zip: MARATHON, FL 33050 City-St-Zip: MARATHON, FL 33050 Title: () Delete Title: () Change () Addition GOULDY, SUSAN Name: Name: Address: P.O. BOX 2910 Address: City-St-Zip: KEY WEST, FL 330452910 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: HARDER, JACKIE Name: HARDER, JACKIE Address: P O BOX 1197 Address: P O BOX 1197 City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: TAVERNIER, FL 33070 Title: () Delete Title: VC (X) Change () Addition MOORE, TOM MOORE, TOM Name: Name: 101499 OVERSEAS HWY 101499 OVERSEAS HWY Address: Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: KEY LARGO, FL 33037 Title: () Delete Title: (X) Change () Addition LANNON, MICHAEL GREENE, JUDY Name: Name: Address: 242 WHTE STREET Address: 1111 12TH STREET, SUITE 301 KEY WEST, FL 33040 KEY WEST, FL 33040 City-St-Zip: 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: SUSAN GOULDY P 01/06/2004