

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 12 PM 12:17

DOCUMENT # 700671 (1)

1. Corporation Name

UNITED WAY OF MANATEE COUNTY, INC.

Principal Place of Business

Mailing Address

1701 14TH STREET WEST
P.O. BOX 109
BRADENTON FL 34206-7109

1701 14TH STREET WEST
P.O. BOX 109
BRADENTON FL 34206-7109

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1960

3a. Date of Last Report

03/07/1994

4. FEI Number

59-0901509

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under C. 190.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Zip

24

29

Country

Country

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOONTZ, GERARD F.
1701 14TH ST., W.
BRADENTON FL 34205

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Gerard F. Koontz

GERARD F. KOONTZ, EXECUTIVE DIRECTOR MAR 6, 1995

Signature, typed or printed name of registered agent (see 4. and 5. for details)

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD
NAME	KORCHECK, STEPHEN M
STREET ADDRESS	5840 28 ST W
CITY - ST - ZIP	BRADENTON FL
TITLE	PD
NAME	RIDINGS, DOROTHY
STREET ADDRESS	102 MANATEE AVE., W.
CITY - ST - ZIP	BRADENTON FL
TITLE	SD
NAME	ANDERSON, TOMMIE
STREET ADDRESS	2250 WHITFIELD AVE
CITY - ST - ZIP	SARASOTA FL
TITLE	TD
NAME	HAMLIN, CURTIS
STREET ADDRESS	1205 MANATEE AVE., W.
CITY - ST - ZIP	BRADENTON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11 TITLE	PD	☒ Change ☐ Addition
12 NAME	Korcheck, Stephen J.	
13 STREET ADDRESS	5840 26th St. W.	
14 CITY - ST - ZIP	Bradenton, FL 34205	
21 TITLE	V/D	☒ Change ☐ Addition
22 NAME	Ken Oden	
23 STREET ADDRESS	1001 3rd Ave. W., 5th Floor	
24 CITY - ST - ZIP	Bradenton, FL 34205	
31 TITLE	S/D	☒ Change ☐ Addition
32 NAME	Susan Moseley	
33 STREET ADDRESS	1724 Manatee Ave. W.	
34 CITY - ST - ZIP	Bradenton, FL 34205	
41 TITLE	T/D	☒ Change ☐ Addition
42 NAME	Jacqueline T. Peebles	
43 STREET ADDRESS	6102 US Hwy. 301 N.	
44 CITY - ST - ZIP	Ellenton, FL 34222	
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jacqueline T. Peebles

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-95 813-748-1312

Date

Signature (Print Name)