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Apr 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **707160** (8)

1. Corporation Name

UNITED WAY OF ALACHUA COUNTY, INC.

Principal Place of Business

Mailing Address

**5200-A W. NEWBERRY ROAD
GAINESVILLE FL 32607
US**

**5200-A W. NEWBERRY RD
GAINESVILLE FL 32602
US**



3. Date Incorporated or Qualified

04/15/1964

4. FEI Number

59-0808855

Applied For

Not Applicable

2. Principal Place of Business

21 6031 N.W. 1st. Place

Suite, Apt. #, etc.

22

City & State

23 Gainesville, Florida

Zip

24 32607-2025

Country

25 USA

2a. Mailing Address

26 6031 N.W. 1st. Place

Suite, Apt. #, etc.

27

City & State

28 Gainesville, Florida

Zip

29 32607-2025

Country

30 USA

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**REARDON, STEVEN E.
5200-A W. NEWBERRY ROAD
GAINESVILLE FL 32607**

10. Name and Address of New Registered Agent

81 Name

Steven E. Reardon

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

6031 N.W. 1st Place

83

84 City

Gainesville

FL

85 Zip Code
32607

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **ELLIS LARRY T**
STREET ADDRESS **UF UF ELMORE HALL/ RADIO RD ROOM 102**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE **VD** ☒ DELETE
NAME **VAN NORTWICK TERRY**
STREET ADDRESS **2826 NE 19TH DR**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE **STD** ☒ DELETE
NAME **SHAAK, GRAIG D**
STREET ADDRESS **228A MUSEUM**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE **D** ☐ DELETE
NAME **PAGE, ROBERT**
STREET ADDRESS **4830 NW 43RD STREET #K-164**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☐ Change ☒ Addition
1.2 NAME **Terry Van Nortwick**
1.3 STREET ADDRESS **2826 N.E. 19th Drive**
1.4 CITY-ST-ZIP **Gainesville FL 32609**

2.1 TITLE **VD** ☐ Change ☒ Addition
2.2 NAME **Larry W. Tyree**
2.3 STREET ADDRESS **3000 N.W. 83rd Street**
2.4 CITY-ST-ZIP **Gainesville FL 32606**

3.1 TITLE **STD** ☐ Change ☒ Addition
3.2 NAME **Pat polopolus**
3.3 STREET ADDRESS **4141 N.W. 37th Place**
3.4 CITY-ST-ZIP **Gainesville FL 32606**

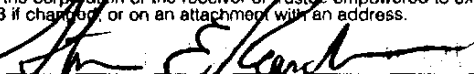
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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



Steven E. Reardon

3/31/98

352-331-2800

CP2E037 (10/97)