

2001 UNIFORM BUSINESS REPORT (UBR)

8

FILED
Aug 20, 2001 8:00 am
Secretary of State

08-06-2001 90001 019 ****61.25

DOCUMENT # 702852

1. Entity Name

UNITED WAY OF INDIAN RIVER COUNTY, INC.

Principal Place of Business

601 21ST STR.
310
VERO BEACH FL 32960
US

Mailing Address

P.O. BOX
VERO BEACH FL 32961-1960
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1087090

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YOUNGBLUTH, KAY A.
601 21ST ST., STE 310
VERO BEACH FL 32960

Name

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

City

FL

Zip Code

8. 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

Kay A. Youngbluth

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

(NOTE: Registered Agent signature required when reinstating)

7/26/01
DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **COTHERMAN, ROSS**
STREET ADDRESS **5070 N. A-1-A, STE-250**
CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE **VD** ☐ Delete
NAME **O'NEILL, BEVERLY**
STREET ADDRESS **9790 61ST PLACE**
CITY-ST-ZIP **SEBASTIAN FL 32958**

TITLE **TD** ☒ Delete
NAME **BAUCHMAN, ROBERT**
STREET ADDRESS **755 BEACHLAND BLVD.,**
CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE **SD** ☐ Delete
NAME **COYLE, JANE**
STREET ADDRESS **1600 36TH ST, STE-B**
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **O'Neill, Beverly, President** ☒ Change ☐ Addition
NAME
STREET ADDRESS **9790 61st Place**
CITY-ST-ZIP **Sebastian, FL 32958**

TITLE **Coyle, Jane, President Elect** ☒ Change ☐ Addition
NAME
STREET ADDRESS **1600 36th St, Ste-B**
CITY-ST-ZIP **VERO BEACH, FL 32960**

TITLE **Tompkins, Sue, Treasurer** ☐ Change ☒ Addition
NAME
STREET ADDRESS **2940 Cardinal Drive**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **Adam, Fran, Secretary** ☐ Change ☒ Addition
NAME
STREET ADDRESS **1990 25th St.**
CITY-ST-ZIP **VERO BEACH, FL 32960**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/26/01 561-567-8900

CR2E037 (5/01)