

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 23, 2004 8:00 am**  
**Secretary of State**

01-23-2004 90040 015 \*\*\*\*70.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # 720484</b><br>1. Entity Name<br><b>HEART OF FLORIDA UNITED WAY, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| Principal Place of Business<br><b>1940 TRAYLOR BLVD</b><br><b>ORLANDO, FL 32804 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        |                                                                                     | Mailing Address<br><b>1940 TRAYLOR BLVD</b><br><b>ORLANDO, FL 32804 US</b> |                                                                                                                                                                                                                                       |                                                                              |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                        | 3. Mailing Address                                                                  |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                        | Suite, Apt. #, etc.                                                                 |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                        | City & State                                                                        |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                        | Country                                                                             |                                                                            | Zip                                                                                                                                                                                                                                   |                                                                              |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                        | Country                                                                             |                                                                            | Country                                                                                                                                                                                                                               |                                                                              |
| 6. Name and Address of Current Registered Agent<br><br><b>DYMOND, WILLIAM T JR</b><br><b>215 N EOLA DR</b><br><b>ORLANDO, FL 32802</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                        |                                                                                     |                                                                            | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                                              |
| 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| <b>Filing Fee is \$61.25</b><br><b>Due by May 1, 2004</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                        | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                            | <b>\$5.00 May Be</b><br><b>Added to Fees</b>                                                                                                                                                                                          |                                                                              |
| Make check payable to<br><b>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                        |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>               |                                                                                                                                                                                                                                       |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>BRADLEY, KEN<br>1940 TRAYLOR BLVD<br>ORLANDO, FL 32804            | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                             | D<br>Major David Birmingham<br>1940 Traylor Blvd<br>Orl, Fl 32804                                                                                                                                                                     | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>BRASSLER, SHEILA<br>1940 TRAYLOR BLVD<br>ORLANDO, FL 32804        | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                             | D<br>Stephen Fan<br>1940 Traylor Blvd Orl, Fl 32804                                                                                                                                                                                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>BROCKMAN, CHRISTOPHER C<br>1940 TRAYLOR BLVD<br>ORLANDO, FL 32804 | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                             | D<br>Mike Morgan<br>1940 Traylor Blvd Orl, Fl 32804                                                                                                                                                                                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>HOECK, KATHRYN<br>1940 TRAYLOR BLVD<br>ORLANDO, FL 32804          | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                             | V<br>El Cabrel Lee<br>1940 Traylor Blvd Orl, Fl 32804                                                                                                                                                                                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>CLAIR, RON<br>1940 TRAYLOR BOULEVARD<br>ORLANDO, FL 32804         | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                             | P<br>John Hawkins<br>1940 Traylor Blvd<br>Orl, Fl 32804                                                                                                                                                                               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>COOPER, KENTON<br>1940 TRAYLOR BOULEVARD<br>ORLANDO, FL 32804     | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                             |                                                                                                                                                                                                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 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. |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| <b>SIGNATURE:</b> <i>Jill Greiv</i> <i>Jill Greiv</i><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |
| 1/13/04 407-835-0900<br><small>Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                        |                                                                                     |                                                                            |                                                                                                                                                                                                                                       |                                                                              |

# 2004 NONPROFIT CORPORATION ANNUAL REPORT

Attachment

Attachment  
#720484

| Current Officers and Directors (cont.) |                        |  |         | Current Changes/Additions - Officers and Directors |                        |  |  | Current Deletions - Officers and Directors |                        |  |        |
|----------------------------------------|------------------------|--|---------|----------------------------------------------------|------------------------|--|--|--------------------------------------------|------------------------|--|--------|
| Title                                  | D                      |  | Current | Title                                              | D                      |  |  | Title                                      | D                      |  | Delete |
| Name                                   | Debra M. Booth         |  |         | Name                                               | William T. Dymond      |  |  | Name                                       | William T. Dymond      |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            | 1940 Traylor Boulevard |  |  | Address                                    | 1940 Traylor Boulevard |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     | Orlando, FL 32804      |  |  | City State Zip                             | Orlando, FL 32804      |  |        |
| Title                                  | D                      |  | Current | Title                                              | D                      |  |  | Title                                      | D                      |  | Delete |
| Name                                   | Byron Brooks           |  |         | Name                                               | Fonda Cerenzio         |  |  | Name                                       | Fonda Cerenzio         |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            | 1940 Traylor Boulevard |  |  | Address                                    | 1940 Traylor Boulevard |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     | Orlando, FL 32804      |  |  | City State Zip                             | Orlando, FL 32804      |  |        |
| Title                                  | D                      |  | Current | Title                                              | D                      |  |  | Title                                      | D                      |  | Delete |
| Name                                   | William N. Brown       |  |         | Name                                               | Robert J. Raudebaugh   |  |  | Name                                       | Robert J. Raudebaugh   |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            | 1940 Traylor Boulevard |  |  | Address                                    | 1940 Traylor Boulevard |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     | Orlando, FL 32804      |  |  | City State Zip                             | Orlando, FL 32804      |  |        |
| Title                                  | D                      |  | Current | Title                                              | D                      |  |  | Title                                      | D                      |  | Delete |
| Name                                   | Deborah A. Clements    |  |         | Name                                               | Catherine Hoechst      |  |  | Name                                       | Catherine Hoechst      |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            | 1940 Traylor Boulevard |  |  | Address                                    | 1940 Traylor Boulevard |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     | Orlando, FL 32804      |  |  | City State Zip                             | Orlando, FL 32804      |  |        |
| Title                                  | D                      |  | Current | Title                                              | D                      |  |  | Title                                      | D                      |  | Delete |
| Name                                   | Bill Johnston          |  |         | Name                                               | Lee Pates              |  |  | Name                                       | Lee Pates              |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            | 1940 Traylor Boulevard |  |  | Address                                    | 1940 Traylor Boulevard |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     | Orlando, FL 32804      |  |  | City State Zip                             | Orlando, FL 32804      |  |        |
| Title                                  | D                      |  | Current | Title                                              | D                      |  |  | Title                                      | D                      |  | Delete |
| Name                                   | A. Stoddard Crane      |  |         | Name                                               | Dr. Nelson Ying        |  |  | Name                                       | Dr. Nelson Ying        |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            | 1940 Traylor Boulevard |  |  | Address                                    | 1940 Traylor Boulevard |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     | Orlando, FL 32804      |  |  | City State Zip                             | Orlando, FL 32804      |  |        |
| Title                                  | D                      |  | Current | Title                                              | D                      |  |  | Title                                      | D                      |  | Delete |
| Name                                   | Jim Curley             |  |         | Name                                               |                        |  |  | Name                                       |                        |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            |                        |  |  | Address                                    |                        |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     |                        |  |  | City State Zip                             |                        |  |        |
| Title                                  | D                      |  | Current | Title                                              |                        |  |  | Title                                      |                        |  |        |
| Name                                   | Richard Smith          |  |         | Name                                               |                        |  |  | Name                                       |                        |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            |                        |  |  | Address                                    |                        |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     |                        |  |  | City State Zip                             |                        |  |        |
| Title                                  | D                      |  | Current | Title                                              |                        |  |  | Title                                      |                        |  |        |
| Name                                   | Chief Jerry Demings    |  |         | Name                                               |                        |  |  | Name                                       |                        |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            |                        |  |  | Address                                    |                        |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     |                        |  |  | City State Zip                             |                        |  |        |
| Title                                  | D                      |  | Current | Title                                              |                        |  |  | Title                                      |                        |  |        |
| Name                                   | Dennis Freytes         |  |         | Name                                               |                        |  |  | Name                                       |                        |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            |                        |  |  | Address                                    |                        |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     |                        |  |  | City State Zip                             |                        |  |        |
| Title                                  | D/S                    |  | Current | Title                                              |                        |  |  | Title                                      |                        |  |        |
| Name                                   | Lillian Garcia         |  |         | Name                                               |                        |  |  | Name                                       |                        |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            |                        |  |  | Address                                    |                        |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     |                        |  |  | City State Zip                             |                        |  |        |
| Title                                  | D                      |  | Current | Title                                              |                        |  |  | Title                                      |                        |  |        |
| Name                                   | Stephen Graham         |  |         | Name                                               |                        |  |  | Name                                       |                        |  |        |
| Address                                | 1940 Traylor Boulevard |  |         | Address                                            |                        |  |  | Address                                    |                        |  |        |
| City State Zip                         | Orlando, FL 32804      |  |         | City State Zip                                     |                        |  |  | City State Zip                             |                        |  |        |
| Title                                  | D                      |  | Current | Title                                              |                        |  |  | Title                                      |                        |  |        |

attachment

#720484

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Attachment

| Current Officers and Directors (cont.) |                        |         | Current Changes/Additions - Officers and Directors |  | Current Deletions - Officers and Directors |  |
|----------------------------------------|------------------------|---------|----------------------------------------------------|--|--------------------------------------------|--|
| Title                                  | D                      | Current |                                                    |  |                                            |  |
| Name                                   | Ajit Lalchandani       |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | D                      | Current |                                                    |  |                                            |  |
| Name                                   | William F. Merck, II   |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | D                      | Current |                                                    |  |                                            |  |
| Name                                   | Mason Allen Parker     |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | D                      | Current |                                                    |  |                                            |  |
| Name                                   | Ron Pecora             |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | D                      | Current |                                                    |  |                                            |  |
| Name                                   | Lee Cockerell          |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | D/T                    | Current |                                                    |  |                                            |  |
| Name                                   | Michael Harding        |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | V                      | Current |                                                    |  |                                            |  |
| Name                                   | Emery Ivery            |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | V                      | Current |                                                    |  |                                            |  |
| Name                                   | Jill D. Grevi          |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | V                      | Current |                                                    |  |                                            |  |
| Name                                   | Debranne Alcom         |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | V                      | Current |                                                    |  |                                            |  |
| Name                                   | Valerie Mardie         |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | D                      | Current |                                                    |  |                                            |  |
| Name                                   | Norman R. Levine       |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |
| Title                                  | D                      | Current |                                                    |  |                                            |  |
| Name                                   | Roseann Harrington     |         |                                                    |  |                                            |  |
| Address                                | 1940 Traylor Boulevard |         |                                                    |  |                                            |  |
| City State Zip                         | Orlando, FL 32804      |         |                                                    |  |                                            |  |

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Attachment

Current Officers and Directors (cont.)

Current Changes/Additions - Officers and Directors

Current Deletions - Officers and Directors

*Attachment*

*\* 720484*

|                |                        |         |
|----------------|------------------------|---------|
| Title          | D                      | Current |
| Name           | Lars Houmann           |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | D                      | Current |
| Name           | Hope Kramer            |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | D                      | Current |
| Name           | Kelley Mossburg        |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | V                      | Current |
| Name           | Kena Lewis             |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | D                      | Current |
| Name           | Richard Lyons          |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | D                      | Current |
| Name           | Dean Kurtz             |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | D                      | Current |
| Name           | Richard Watkins        |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | D/C                    | Current |
| Name           | Ed Timberlake Jr.      |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |
| Title          | D                      | Current |
| Name           | Robert Kleither        |         |
| Address        | 1940 Traylor Boulevard |         |
| City State Zip | Orlando, FL 32804      |         |

attachment

#720484

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Attachment

Current Officers and Directors (cont.)

Current Changes/Additions - Officers and Directors

Current Deletions - Officers and Directors