

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006804

FILED
Jan 05, 2006
Secretary of State

Entity Name: UNITED WAY 2-1-1 OF MANASOTA, INC.

Current Principal Place of Business:

1445 2ND ST
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1445 2ND ST
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-0262358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, MICHAEL J
200 S ORANGE AVE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C/D () Delete
Name: MCBEAN, ROY
Address: 2097 WASATCH DR.
City-St-Zip: SARASOTA, FL 34235

Title: VC/D (X) Delete
Name: NASH, JOHN S
Address: 4804 1ST AVE. DR. NW
City-St-Zip: BRADENTON, FL 34209

Title: T/D () Delete
Name: KOONTZ, GERARD F SR.
Address: 5812 9TH AVE. DR. W.
City-St-Zip: BRADENTON, FL 34209

Title: S/D () Delete
Name: YOUNG, ALEXANDER L
Address: 1655 SPRING CREEK DR.
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C/D (X) Change () Addition
Name: NASH, JOHN
Address: 4502 CORTEZ RD W
City-St-Zip: BRADENTON, FL 34210

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ALBERTO SUAREZ

DIR

01/05/2006

Electronic Signature of Signing Officer or Director

Date