2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006
Secretary of State

DOCUMENT# 709940

Entity Name: UNITED WAY OF BROWARD COUNTY, INC.

Current Principal Place of Business:

1300 SOUTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

1300 SOUTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33316 US

New Mailing Address:

FEI Number: 59-0624402 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WEBER, DOUGLAS E
1300 S ANDREWS AVE
FT LAUDERDALE, FL 33316 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: DT ( ) Delete
Name: NATIONS, JIM
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: P ( ) Delete
Name: WEBER, DOUGLAS E
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: DC ( ) Delete
Name: JOHNSON, JOHN
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: COO ( ) Delete
Name: STRONG, NANCY M
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316

Title: VP ( ) Delete
Name: CHOATE, DAVID
Address: 1300 S ANDREWS AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VP ( ) Delete
Name: JACKSON, BETH
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition
Name: SIEGEL, RALPH
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

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

Title: DC (X) Change ( ) Addition
Name: HARGROVE, JOHN
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: SVP (X) Change ( ) Addition
Name: STRONG, NANCY M
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316

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: BETH JACKSON VP 04/20/2006

Electronic Signature of Signing Officer or Director — Date