

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709940

FILED
Apr 22, 2008
Secretary of State

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 ()

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:

JACKSON, BETH
1300 S ANDREWS AVE
FT LAUDERDALE, FL 33316 US

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: BETH JACKSON

04/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: SIEGEL, RALPH
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: HARGROVE, JOHN
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

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

Title: VP () Delete
Name: HOPPER, TONY
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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: WILLIAMS, RAY
Address: 1300 S ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

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

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 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

04/22/2008

Electronic Signature of Signing Officer or Director

Date