2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704853

FILED Feb 19, 2009 Secretary of State

Entity Name: UNITED WAY OF ST. LUCIE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

4800 SOUTH US HIGHWAY 1 FORT PIERCE, FL 34982

Current Mailing Address: New Mailing Address:

4800 SOUTH US HIGHWAY 1 FORT PIERCE, FL 34982

FEI Number: 59-6212157 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KNAPP, KAREN 4800 SOUTH US HIGHWAY 1 FORT PIERCE, FL 34982

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:

Address:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition THOMAS, ROGER THOMAS, ROGER Name: Name:

PO BOX 1637 Address: PO BOX 1637 Address:

City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: JENSEN BEACH, FL 34957

Title: Title: (X) Change () Addition () Delete MALONEY, LAURA M Name: JOHNSON, GEORGE Name:

Address: 111 ORANGE AVE Address: 603 N INDIAN RIVER DR SUITE 300

City-St-Zip: FORT PIERCE, FL 34950 City-St-Zip: FORT PIERCE, FL 34950

Title: () Delete Title: (X) Change () Addition KELLY-BROWN, SHARON KELLY-BROWN, SHARON Name: Name: 950 BAYSHORE BLVD. 950 BAYSHORE BLVD. Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip: PORT SAINT LUCIE, FL 34983

() Delete Title: PC Title: (X) Change () Addition CORRICK, ESQ, DENNIS Name: Name: BESSETTE, DAVE 1648 SE PORT ST LUCIE BLVD Address: 1903 S 25TH ST Address: City-St-Zip: FORT PIERCE, FL 34947 City-St-Zip: PORT ST LUCIE, FL 34952

Title: () Delete Title: (X) Change () Addition

RILEY, MARGE FINNEY, LINNES ESQ Name: Name: 1792 NE JENSEN BEACH BLVD PO BOX 3390

City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: FORT PIERCE, FL 34948

Title: () Delete Title: (X) Change () Addition SLOAN-BARTZ, TERRI SLOAN-BARTZ, TERRI Name: Name:

Address: 9698 S. U.S. HWY 1 Address: 9698 S. U.S. HWY 1 PORT SAINT LUCIE, FL 34952 PORT SAINT LUCIE, FL 34952 City-St-Zip: 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.

Address:

SIGNATURE: ROGER THOMAS C 02/19/2009