

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720484

FILED  
Mar 02, 2011  
Secretary of State

**Entity Name:** HEART OF FLORIDA UNITED WAY, INC.

**Current Principal Place of Business:**

1940 TRAYLOR BLVD  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

**Current Mailing Address:**

1940 TRAYLOR BLVD  
ORLANDO, FL 32804 US

**New Mailing Address:**

**FEI Number:** 59-0808854

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DYMOND, WILLIAM T JR  
215 N EOLA DR  
ORLANDO, FL 32802 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: DS  
Name: KHAHAIFA, AVIDO  
Address: 1940 TRAYLOR BLVD  
City-St-Zip: ORLANDO, FL 32804

Title: V  
Name: HAIGHT, ROBERT  
Address: 1940 TRAYLOR BLVD  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: FENGER, CHRISTIAN  
Address: 1940 TRAYLOR BLVD  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: CROSS, JAMES B  
Address: 1940 TRAYLOR BLVD  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: CLEMENTS, DEBBIE  
Address: 1940 TRAYLOR BOULEVARD  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: DEE, KAREN  
Address: 1940 TRAYLOR BLVD  
City-St-Zip: ORLANDO, FL 32804

I hereby 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 all other like empowered.

**SIGNATURE:** JILL GREVI

V

03/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date