

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702744

**FILED**  
**Jan 05, 2016**  
**Secretary of State**  
**CC4291106589**

**Entity Name:** UNITED WAY OF MARION COUNTY, INC.

**Current Principal Place of Business:**

1401 NE 2ND ST.  
OCALA, FL 34470

**Current Mailing Address:**

PO BOX 1086  
OCALA, FL 34478 US

**FEI Number:** 59-0946642

**Certificate of Status Desired:** Yes

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

QUINTEL, SCOT A  
3201 SW 132ND STREET  
OCALA, FL 34473 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:** SCOT QUINTEL

01/05/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            QUINTEL, SCOT A  
Address        3201 SW 132ND STREET  
City-State-Zip: Ocala FL 34473

Title            CHAIR-ELECT  
Name            GREINER, MICHAEL  
Address        301 SE 17TH STREET  
City-State-Zip: Ocala FL 34471

Title            SECRETARY  
Name            LEITGEB, SUSAN L  
Address        2560 NE 120TH STREET  
City-State-Zip: ANTHONY FL 32617

Title            TREASURER  
Name            MOORE, ROBERT  
Address        1105 SE 45TH STREET  
City-State-Zip: Ocala FL 34480

Title            CHAIRMAN  
Name            LARS, HILLESLAND  
Address        6747 SE 99TH PL  
City-State-Zip: BELLEVIEW FL 34420

*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:** SCOT QUINTEL

**PRESIDENT**

01/05/2016

Electronic Signature of Signing Officer/Director Detail

Date