

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 704669

Entity Name: THE UNITED WAY OF COLLIER AND THE KEYS, INC.

Current Principal Place of Business:

9015 STRADA STELL COURT
SUITE 204
NAPLES, FL 34109-4373

Current Mailing Address:

9015 STRADA STELL COURT
SUITE 204
NAPLES, FL 34109-4373 US

FEI Number: 59-1026096

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MENSCH, TIFFANI L
UNITED WAY OF COLLIER COUNTY
9015 STRADA STELL COURT SUITE 204
NAPLES, FL 34109-4373 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: TIFFANI MENSCH

09/25/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, SECRETARY
Name MENSCH, TIFFANI L
Address UNITED WAY OF COLLIER COUNTY
 9015 STRADA STELL COURT SUITE
 204
City-State-Zip: NAPLES FL 34109-4373

Title TREASURER
Name LIMB, NANCY
Address 9015 STRADA STELL COURT
 SUITE 204
City-State-Zip: NAPLES FL 34109-4373

Title VC
Name JONES, MARIA
Address 9015 STRADA STELL CT. #204
City-State-Zip: NAPLES FL 34109

Title IMMEDIATE PAST CHAIR
Name MATHEWS-FITCH, DEBBIE
Address 9015 STRADA STELL COURT
 SUITE 204
City-State-Zip: NAPLES FL 34109-4373

Title CHAIR
Name CONNELLY, KATHY
Address 9015 STRADA STELL COURT
 SUITE 204
City-State-Zip: NAPLES FL 34109-4373

Title INCOMING CHAIR
Name BARRY, PETER
Address 9015 STRADA STELL COURT
 SUITE 204
City-State-Zip: NAPLES FL 34109-4373

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: TIFFANI MENSCH

PRESIDENT/CEO

09/25/2023

Electronic Signature of Signing Officer/Director Detail

Date