#### 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 710548** 

Entity Name: UNITED WAY OF CHARLOTTE COUNTY, INC.

FILED
Jan 25, 2023
Secretary of State
7816029361CC

# **Current Principal Place of Business:**

17831 MURDOCK CIRCLE

SUITE A

PORT CHARLOTTE, FL 33948

## **Current Mailing Address:**

17831 MURDOCK CIRCLE

SUITE A

PORT CHARLOTTE, FL 33948

FEI Number: 59-1149995 Certificate of Status Desired: Yes

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

MATTHIESSEN, ANGIE 17831 MURDOCK CIRCLE

SUITE A

PORT CHARLOTTE, FL 33948 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: ANGIE MATTHIESSEN

01/25/2023

Electronic Signature of Registered Agent Date

### Officer/Director Detail:

Title ED Title DIRECTOR

Name MATTHIESSEN, ANGIE Name BENDER, JOE DR.

Address 17831 MURDOCK CIRCLE Address 17831 MURDOCK CIRCLE

SUITE A SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948 City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR Title PRESIDENT

Name RUSSELL, W. KEVIN Name GOLDBERG, HARVEY

Address 17831 MURDOCK CIRCLE Address 17831 MURDOCK CIRCLE

SUITE A SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948 City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR Title DIRECTOR

Name WOOD, WILLIAM DR. Name CARDONA, KRISTIN

Address 17831 MURDOCK CIRCLE Address 17831 MURDOCK CIRCLE

SUITE A SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948 City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR Title DIRECTOR

Name CULLINAN, MARCIA Name CURASCO, STEPHEN

Address 17831 MURDOCK CIRCLE Address 17831 MURDOCK CIRCLE

SUITE A SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948 City-State-Zip: PORT CHARLOTTE FL 33948

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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: ANGIE MATTHIESSEN DIRECTOR 01/25/2023

#### Officer/Director Detail Continued:

Title DIRECTOR
Name GANT, ERIN

Address 17831 MURDOCK CIRCLE

SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR

Name HUFF-SUFFERLING, CARYN

Address 17831 MURDOCK CIRCLE

SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR

Name REYNOLDS, CARA

Address 17831 MURDOCK CIRCLE

SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR

Name ERAHT, MICHAEL

Address 17831 MURDOCK CIRCLE

SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR

Name GRANT OLIVER, VANESSA

Address 17831 MURDOCK CIRCLE

SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR

Name MILLER, CHARLOTTE

Address 17831 MURDOCK CIRCLE

SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948

Title DIRECTOR

Name WESTON, PATRICE

Address 17831 MURDOCK CIRCLE

SUITE A

City-State-Zip: PORT CHARLOTTE FL 33948