

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 711452

Entity Name: UNITED WAY OF LAKE AND SUMTER COUNTIES, INC.

Current Principal Place of Business:

32644 BLOSSOM LANE
LEESBURG, FL 34788

Current Mailing Address:

32644 BLOSSOM LANE
LEESBURG, FL 34788 US

FEI Number: 59-1143758

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLDEN, ALAN
32644 BLOSSOM LANE
LEESBURG, FL 34788 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: ALAN HOLDEN

06/20/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LUCAS, DON
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title CHAIRMAN
Name CULPEPPER, DIANE
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title TREASURER
Name HIBBARD, BROOKE
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title SECRETARY
Name BURRY, GAIL
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title P, CEO
Name HOLDEN, ALAN
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title VC
Name DE LIBRO, CHRIS
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name BLAKE, JOSHUA
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name CORNELL, BRYAN
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

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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: ALAN HOLDEN

PRESIDENT, CEO

06/20/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JONES, EUGENE DR.
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name SKAGGS, STEVE
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title D
Name SEMESCO, JIM
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name RHODES, MARY
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title D
Name SLUDER, JOE
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788

Title D
Name YATES, STEVE
Address 32644 BLOSSOM LANE
City-State-Zip: LEESBURG FL 34788