2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715398

Entity Name: UNITED WAY OF SUWANNEE VALLEY, INC.

FILED Feb 27, 2024 Secretary of State 5255273498CC

Current Principal Place of Business:

871 SW STATE ROAD 47 LAKE CITY. FL 32025-0433

Current Mailing Address:

871 SW STATE ROAD 47 LAKE CITY. FL 32025-4033 US

LANE OITT, TE 32023-4033 03

FEI Number: 59-1262354 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BURNS, JOHN W III 234 SW MAIN BLVD. LAKE CITY, FL 32025 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: JOHN BURNS 02/27/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title HAMILTON COUNTY CAMPAIGN Title

CHAIR

Name FENNEMAN, DON

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025-0433

Title DIRECTOR

Name COCHRAN, PAM

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025-4033

Title DIRECTOR

Name COTHRAN, CECILIA

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025

Title PAST PRESIDENT

Name ROBINSON, KECIA

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025-0433

Title ASST. TREASURER

Name SIMPSON, LORI

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025-0433

Title DIRECTOR

Name MORGAN, SHAYNE

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025-4033

Title PRESIDENT

Name COWAN, CHARLIE

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025-0433

Title DIRECTOR

Name DOONAN, BARBARA

Address 871 SW STATE ROAD 47

City-State-Zip: LAKE CITY FL 32025-0433

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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: JENNIFER ANCHORS

CEO

02/27/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title CEO Title DIRECTOR

NameANCHORS, JENNIFERNameKUYKENDALL, BLAKEAddress871 SW STATE ROAD 47Address871 SW STATE ROAD 47City-State-Zip:LAKE CITY FL 32025-0433City-State-Zip:LAKE CITY FL 32025