2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735013

Entity Name: UNITED WAY OF NORTHWEST FLORIDA, INC.

FILED
Jan 11, 2018
Secretary of State
CC5394812662

Current Principal Place of Business:

602 HARRISON AVENUE

SUITE 3

PANAMA CITY, FL 32401

Current Mailing Address:

P.O. BOX 586

PANAMA CITY, FL 32402

FEI Number: 59-0863698 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TAYLOR, ANDREW B 602 HARRISON AVENUE SUITE 3 PANAMA CITY, FL 32401 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: ANDREW B TAYLOR 01/11/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title IMMEDIATE PAST CHAIRMAN Title TREASURER, SECRETARY CRAMER, WILLIAM SOWELL, JR, JERRY F Name Name P.O. BOX 586 626 LUVERNE AVENUE Address Address City-State-Zip: PANAMA CITY FL 32402 City-State-Zip: PANAMA CITY FL 32401

TitleEXECUTIVE DIRECTORTitleCHAIRMANNameTAYLOR, ANDREW BNameRAGO, RONAddressP.O. BOX 586AddressP.O. BOX 586

City-State-Zip: PANAMA CITY FL 32402 City-State-Zip: PANAMA CITY FL 32402

Title CHAIRMAN ELECT Title VC

Name HAMILTON, SHARON Name HAIMAN, DARREN

Address P.O. BOX 586 Address P.O. BOX 586

City-State-Zip: PANAMA CITY FL 32402 City-State-Zip: PANAMA CITY FL 32402

Title VICE PRESIDENT/ CHIEF OPERATING

OFFICER

Name HINDS, TIFFANI Address P.O. BOX 586

City-State-Zip: PANAMA CITY FL 32402

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 HINDS VP/COO 01/11/2018