

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753220

Entity Name: UNITED WAY OF FLORIDA, INC.

Current Principal Place of Business:

307 E. 7TH AVENUE
TALLAHASSEE, FL 32303-5520

Current Mailing Address:

307-B EAST 7TH AVENUE
TALLAHASSEE, FL 32303-5520

FEI Number: 59-2104175

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OWEN, RICK
307-B EAST 7TH AVENUE
TALLAHASSEE, FL 32303 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: RICK OWEN

05/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name DALY, PAUL
Address 401 IDLEWYLD DRIVE
City-State-Zip: FT. LAUDERDALE FL 33301

Title DIRECTOR
Name LAFFITTE, ADRIAN
Address 3441 THURLOE DRIVE
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name FOSTER, SHAWN
Address 9842 BALSARIDGE CT.
City-State-Zip: TRINITY FL 34655

Title IMMEDIATE PAST CHAIR
Name GRIFFITHS, ANDY
Address 40 KEY HAVEN ROAD
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR
Name GAIR, WILLIAM
Address 29 TIGERT HALL
City-State-Zip: GAINESVILLE FL 32611

Title CHAIR
Name CANNON, KATHLEEN
Address 1300 SOUTH ANDREWS AVE.
City-State-Zip: FT. LAUDERDALE FL 33316

Title DIRECTOR
Name HOUWAART-DIEZ, CAROL
Address P. O. BOX 362
City-State-Zip: STUART FL 34995

Title CHAIR-ELECT
Name RILEY, RANDY
Address 2500 VIRGINIA AVENUE
City-State-Zip: FT. PIERCE FL 34957

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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: KATHLEEN CANNON

BOARD CHAIR

05/18/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SLOUGH, BEVERLY
Address 341 W. ADELAIDE DRIVE
City-State-Zip: ST. JOHNS FL 32259

Title DIRECTOR
Name BASSLER, JAYNE
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title SECRETARY/TREASURER
Name HAYWARD, JEFF
Address 1940 TRAYLOR BLVD.
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR
Name GEORGE, LAURIE
Address 477 S. ROSEMARY AVENUE
230
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name HILLESLAND, JACK
Address 6747 SW 99TH PLACE
City-State-Zip: BELLEVIEW FL 34420

Title DIRECTOR
Name SANDERSON, STEVE
Address 9015 STRADA STELL CT.
204
City-State-Zip: NAPLES FL 34109-4373

Title DIRECTOR
Name STILES, CRYSTAL
Address 700 UNIVERSE BLVD.
City-State-Zip: JUNO BEACH FL 33408

Title DIRECTOR
Name COX, BERNEICE
Address 307 EAST SEVENTH AVENUE
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name EPSKY, THOMAS
Address 2740 CENTERVIEW DRIVE
101
City-State-Zip: TALLAHASSEE FL 32399

Title DIRECTOR
Name GILLIAM, LAURA
Address 1301 W. GOVERNMENT STREET
City-State-Zip: PENSACOLA FL 32501

Title DIRECTOR
Name NELSON, MELISSA
Address P. O. BOX 625
City-State-Zip: ST. AUGUSTINE FL 32085-0625