

**2023 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:**

NELSON, MELISSA C  
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:** MELISSA C. NELSON

04/18/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title DIRECTOR  
Name RILEY, RANDY  
Address 1118 4TH LANE SW  
City-State-Zip: VERO BEACH FL 32962

Title IMMEDIATE PAST CHAIR  
Name HAYWARD, JEFF  
Address 1940 TRAYLOR BLVD.  
City-State-Zip: ORLANDO FL 32804

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

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

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

Title DIRECTOR  
Name CAMPENNI, THOMAS  
Address 700 SW ST. LUCIE CRESCENT  
City-State-Zip: STUART FL 34994

Title SECRETARY, TREASURER  
Name MORTON, CHUCK  
Address 4846 N. UNIVERSITY DRIVE, #214  
City-State-Zip: LAUDERHILL FL 33351

**Continues on page 2**

*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:** THOMAS EPSKY

BOARD CHAIR

04/18/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GRIFFIN, MICHAEL  
Address 900 HOPE WAT  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR  
Name EDGCOMB, COURTNEY  
Address 3747 W. INTERNATIONAL SPEEDWAY BLVD.  
City-State-Zip: DAYTONA BEACH FL 32124

Title DIRECTOR  
Name JONES, SUZETTE  
Address 525 E. CHRISTINA BLVD.  
City-State-Zip: LAKELAND FL 33813-4554

Title DIRECTOR  
Name MUROFF, JESSICA  
Address 5201 W. KENNEDY BLVD.  
SUITE 600  
City-State-Zip: TAMPA FL 33609

Title DIRECTOR  
Name MCBEE, KIM  
Address 111 N. MAGNOLIA AVE., #1450  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name JASEN, KELLY  
Address 112 TUPELO AVENUE  
City-State-Zip: FT. WALTON FL 32548

Title DIRECTOR  
Name MILLER, AMBER  
Address 6031 NW 1ST PLACE  
City-State-Zip: GAINESVILLE FL 32607-2025