Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N20347

Entity Name: UNITED WAY OF HERNANDO COUNTY, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

4030 COMMERCIAL WAY SPRING HILL, FL 34606

Current Mailing Address:

4030 COMMERCIAL WAY SPRING HILL, FL 34606

FEI Number: 59-2848474

Name and Address of Current Registered Agent:

BONFARDINO, ANGELA 4030 COMMERCIAL WAY SPRING HILL, FL 34606 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: ANGELA BONFARDINO				
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	EXECUTIVE DIRECTOR, CEO	Title	CHAIRMAN, DIRECTOR	
Name	BONFARDINO, ANGELA	Name	WHARTON, GINA	
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY	
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606	
Title	SECRETARY, DIRECTOR	Title	VC, DIRECTOR	
Name	WARD, FRANCINE	Name	EHLENBECK, JOHN	
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY	
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606	
Title	DIRECTOR	Title	DIRECTOR	
Name	FOREMAN, MATTHEW	Name	GONZALEZ, DAVID	
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY	
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606	
Title	TREASURER, DIRECTOR	Title	DIRECTOR	
Name	HANLEY, CHAEL	Name	KUPCIK, TOM	
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY	
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606	

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: ANGELA BONFARDINO

EXECUTIVE DIRECTOR/CEO 03/03/2016

Date

FILED Mar 03, 2016 Secretary of State CC2401674028

Certificate of Status Desired: No

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	LINKUL, RICHARD	Name	MITTEN, JOHN R
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606
Title	DIRECTOR	Title	DIRECTOR
Name	NORMAN-VACHA, JENNENE	Name	PORTER, STEVE
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606
Title	DIRECTOR	Title	DIRECTOR
Name	WILLIAMS, LISA	Name	WOODARD, NICK
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606
Title	DIRECTOR	Title	DIRECTOR
Name	CASSARA, FRANK	Name	GREEN, BRITTANY
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606
Title	DIRECTOR	Title	DIRECTOR
Name	SCAVUZZO, CHRIS D.	Name	STEINMETZ, GARY
Address	4030 COMMERCIAL WAY	Address	4030 COMMERCIAL WAY
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	SPRING HILL FL 34606