

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702977

FILED  
Jul 02, 2009  
Secretary of State

Entity Name: UNITED WAY OF SARASOTA COUNTY, INC.

## Current Principal Place of Business:

1445 2ND STREET  
SARASOTA, FL 34236 US

## New Principal Place of Business:

## Current Mailing Address:

1445 2ND STREET  
SARASOTA, FL 34236 US

## New Mailing Address:

FEI Number: 59-0737866      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

YOUNG, ALEXANDER L  
1445 2ND STREET  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: YOUNG, ALEX L  
Address: 1445 2ND STREET  
City-St-Zip: SARASOTA, FL 34236

Title: T ( ) Delete  
Name: DOUGLAS, DEBRA  
Address: 1445 2ND ST  
City-St-Zip: SARASOTA, FL 34236

Title: C ( ) Delete  
Name: MERRIMAN, SHAUN  
Address: 1445 2ND ST  
City-St-Zip: SARASOTA, FL 34236

Title: VC (X) Delete  
Name: LAZARUS, MARC  
Address: 1445 2ND ST  
City-St-Zip: SARASOTA, FL 34236

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: YOUNG, ALEXANDER L  
Address: 1445 2ND STREET  
City-St-Zip: SARASOTA, FL 34236

Title: T (X) Change ( ) Addition  
Name: SCOTT, SUSAN  
Address: 1445 2ND ST  
City-St-Zip: SARASOTA, FL 34236

Title: C (X) Change ( ) Addition  
Name: DEBRA, DOUGLAS  
Address: 1445 2ND ST  
City-St-Zip: SARASOTA, FL 34236

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALEXANDER L. YOUNG

D

07/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date