


2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 21, 2007 8:00 am
Secretary of State

03-21-2007 90045 014 ****70.00

DOCUMENT # 703769	
1. Entity Name UNITED WAY OF PALM BEACH COUNTY, INC.	

Principal Place of Business 2600 QUANTUM BLVD. BOYTON BEACH, FL 33426 US	Mailing Address 2600 QUANTUM BLVD BOYNTON BEACH, FL 33426
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State	4. FEI Number 59-0683258	Applied For Not Applicable
Zip	Country	Zip	Country

03062007 Chg-NP CR2E037 (12/06)



6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BADESCH, SCOTT B. 2600 QUANTUM BLVD. BOYTON BEACH, FL 33426		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M BADESCH, SCOTT B. 2600 QUANTUM BLVD. BOYTON BEACH, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JENKINS, CRAIG 324 DATURA ST., STE. 401 WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREGMAN, HOWARD 777 SOUTH FLAGLER DRIVE STE 310E WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOLSEY, THOMAS R 101 NORTH CLEMATIS STREET STE 202 WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer JOHNSON, Robert D 190 NW 12th Ave, 3rd Floor Deerfield Beach, FL 33442 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman MARIACA, Sergio A 505 S Flagler Dr, Ste 1331 West Palm Beach, FL 33401 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary CANTWELL, Anne E One North Federal Highway Boca Raton, FL 33432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne Cunningham Wayne Cunningham, COO (561)375 6600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #