

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708312

1. Entity Name

UNITED WAY OF NORTHEAST FLORIDA, INC.

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90248 007 ****61.25

Principal Place of Business

Mailing Address

1300 RIVERPLACE BLVD
 SUITE 500
 JACKSONVILLE FL 32207

P.O. BOX 41428
 JACKSONVILLE FL 32203-1428

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0637825

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HODGES, CONNIE S
 1300 RIVERLACE BLVD
 STE 500
 JACKSONVILLE FL 32207

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	COD BAKER, RONALD M 21 W. CHURCH ST, 16TH FLOOR JACKSONVILLE FL 32202	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRZOWSKI, PATRICIA A P.O. BOX 4579 JACKSONVILLE FL 32231-4579	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURDETTE, KAREN E 10151 DEERWOOD PARK BLVD. JACKSONVILLE FL 32256	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARLEY, BETTY S PO BOX 2417 JACKSONVILLE FL 32231	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCFV CLARK, ROGER PO BOX 7219 JACKSONVILLE FL 32202	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DELANEY, KEVIN PO BOX 16469 JACKSONVILLE FL 32210	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
See Attached		
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
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 exemption stated in Section 119.07(3)(i), 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: *Connie S Hodges*

SIGNATURE REQUIRED

Connie S Hodges

4/28/00 (904) 390-3200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

Attachment # 708312 956824

**UNITED WAY OF NORTHEAST FLORIDA
BOARD OF TRUSTEES**

1999/2000

Walter P. Bussells, Chairman

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1999-2000**

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s:board/1999-2000 Board of Trustees

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1999 - 2000

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Attachment # 708312

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BOARD OF DIRECTORS .
1999 - 2000

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**UNITED WAY OF NORTHEAST FLORIDA
BOARD OF DIRECTORS
1999 - 2000**

Ronald M. Baker, Chairman

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