

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708312

1. Entity Name

UNITED WAY OF NORTHEAST FLORIDA, INC.

Principal Place of Business

1300 RIVERPLACE BLVD
SUITE 500
JACKSONVILLE FL 32207

Mailing Address

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HODGES, CONNIE S
1300 RIVERPLACE 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 ED ☒ Delete
NAME CRAMER, SKIP
STREET ADDRESS 751 RIVERSIDE AVENUE
CITY-ST-ZIP JACKSONVILLE FL 32204

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS See Attached list
CITY-ST-ZIP

TITLE DCEO ☒ Delete
NAME BUSSELLS, WALTER P
STREET ADDRESS 21 WEST CHURCH ST.
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME GAY, ELEANOR
STREET ADDRESS 5103 GRANN LLOYD DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32209-1070

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CIO ☒ Delete
NAME BAKER, RONALD M
STREET ADDRESS 21 WEST CHURCH STREET, 16TH FLOOR
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CAC ☒ Delete
NAME BRZOWSKI, PATRICIA A
STREET ADDRESS P.O BOX 4579
CITY-ST-ZIP JACKSONVILLE FL 32231-4579

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DDA ☒ Delete
NAME CARLEY, BEETY S
STREET ADDRESS P.O BOX 2417
CITY-ST-ZIP JACKSONVILLE FL 32231

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: Patricia Kilgore

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

904-390-3200

Date

Daytime Phone #

CR2E037 (9/01)

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

July 2001- June 2002

HUGH GREENE, CHAIRMAN *Atchman's*

SHERRY BURNS (*Asst - Georgette*)
Vice President & General Manager
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Primary #665-6441
Private #665-7570 (leave message)
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795030*

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UNITED WAY OF NORTHEAST FLORIDA
BOARD OF DIRECTORS
JULY 2001- JUNE 2002
MADELINE SCALES-TAYLOR, CHAIRMAN

Attachments

708312
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BOARD OF DIRECTORS
JULY 2001- JUNE 2002
MADELINE SCALES-TAYLOR, CHAIRMAN**

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Attachment
#70832
795030

UNITED WAY OF NORTHEAST FLORIDA
BOARD OF DIRECTORS
JULY 2001- JUNE 2002
MADELINE SCALES-TAYLOR, CHAIRMAN

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UNITED WAY OF NORTHEAST FLORIDA, INC.
AS OF JUNE 30, 2002

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795 030

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