FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 PM 3:36

DOCUMENT # **711452** **(3)**

1. Corporation Name
UNITED WAY OF LAKE AND SUMTER COUNTIES, INC.

Principal Place of Business	Mailing Address
734 N. 3RD ST. SUITE 418-B LEESBURG FL 34748	734 N. 3RD ST. SUITE 418-B LEESBURG FL 34748

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/06/1966
3a. Date of Last Report: 03/22/1994
4. FEI Number: 59-1143758 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address	
21 734 N. 3RD. STREET	26 734 N. 3RD. STREET	5. Certificate of Status Desired ☒ — **$8.75** Additional Fee Required
Suite, Apt. #, etc. 22 SUITE 419	Suite, Apt. #, etc. 27 SUITE 419	6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
City & State 23 LEESBURG, FL	City & State 28 LEESBURG, FL	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — **$68.75** Supplemental Fee Not Required
Zip / Country 24 34748 / 25 LAKE	Zip / Country 29 34748 / 30 LAKE	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CLARK, RICHARD M.
734 N. 3RD STREET, SUITE 418-B
LEESBURG FL 34748

10. Name and Address of New Registered Agent

81 Name: CLARK, RICHARD M.
82 Street Address (P.O. Box Number is Not Acceptable): 734 N. 3RD. STREET
83 SUITE 419
84 City: LEESBURG, FL 85 Zip Code: 34748

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
NAME	HOLMES, JOSEPH E	12 NAME	MANN, DAVID M.	
STREET ADDRESS	200 EAST FIFTH AVE.	13 STREET ADDRESS	900 NORTH 14TH STREET	
CITY-ST-ZIP	MOUNT DORA FL 32757	14 CITY-ST-ZIP	LEESBURG, FL 34748	
TITLE	VD	21 TITLE	VD	☐ Change ☒ Addition
NAME	MANN, DAVID M	22 NAME	WAHL, PETER F.	
STREET ADDRESS	900 NORTH 14TH STREET	23 STREET ADDRESS	PO BOX 430 (N/A)	
CITY-ST-ZIP	LEESBURG FL	24 CITY-ST-ZIP	LADY LAKE, FL 32158-0430	
TITLE	TD	31 TITLE	TD	☐ Change ☐ Addition
NAME	SEABROOK, WILLIAM B	32 NAME	SEABROOK, WILLIAM B.	
STREET ADDRESS	1711 NORTH CITRUS BLVD	33 STREET ADDRESS	1711 NORTH CITRUS BLVD	
CITY-ST-ZIP	LEESBURG FL	34 CITY-ST-ZIP	LEESBURG, FL 34748	
TITLE	SD	41 TITLE	SD	☐ Change ☒ Addition
NAME	MULLINS, KEITH	42 NAME	JONES, WILLIAM P.	
STREET ADDRESS	141 N. HWY 27	43 STREET ADDRESS	PO BOX 490720 (N/A)	
CITY ST ZIP	CLERMONT FL 34711	44 CITY-ST-ZIP	LEESBURG, FL 34749-0720	
TITLE	D	51 TITLE	D	☒ Change ☐ Addition
NAME	CLARK, RICHARD M	52 NAME	CLARK, RICHARD M.	
STREET ADDRESS	734 N. 3RD STREET, SUITE 418-B	53 STREET ADDRESS	734 N. 3RD. STREET, SUITE 419	
CITY ST ZIP	LEESBURG FL 34748	54 CITY-ST-ZIP	LEESBURG, FL 34748	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ March 15, 1995 (904)787-7530
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #