2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#722815

FILED Apr 03, 2009 Secretary of State

Entity Name: THE UNITED WAY OF OKALOOSAWALTON COUNTIES, INC.

Current Principal Place of Business: New Principal Place of Business:

112 TUPELO AVE

FORT WALTON BEACH, FL 32548 US

Current Mailing Address: New Mailing Address:

112 TUPELO AVE

FORT WALTON BEACH, FL 32548 US

FEI Number: 59-0972293 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBINSON, WILLIAM M 672 MERIONETH DR

FT. WALTON BEACH, FL 32548 US

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:

100.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: PRES () Delete Title: CHA
Name: SHANAHAN, JOYCE Name: DAIL

 Name:
 SHANAHAN, JOYCE
 Name:
 DAILEY, JEANNE

 Address:
 P O BOX 4009
 Address:
 12815 W HIGHWAY 98, STE 100

City-St-Zip: FORT WALTON BEACH, FL 32549 City-St-Zip: DESTIN, FL 32541

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SIMS, SANDRA
 Name:
 GIESEMAN, ALAN

 Address:
 140 SW HOLLYWOOD BLVD
 Address:
 1005 MAR WALT DR

City-St-Zip: FT. WALTON BEACH, FL 32548 City-St-Zip: FT. WALTON BEACH, FL 32547

 Name:
 GIESEMAN, ÄLÄN
 Name:
 WYATT, VINCENT

 Address:
 1005 MAR WALT
 Address:
 1000 MAR WALT

City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: FORT WALTON BEACH, FL 32547

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$

 Name:
 DAILEY, JEANNE
 Name:
 CURRY, JIM

 Address:
 12815 W HWY 98 STE 100
 Address:
 1804 LEWIS TURNER BLVD, STE 400

City-St-Zip: DESTIN, FL 32541 City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D () Delete Title: () Change () Addition Name: BURKETT, SAM Name:

 Address:
 PO BOX 1935
 Address:

 City-St-Zip:
 EGLIN AFB, FL 32542
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

Name:ROBINSON, WILLIAMName:ROBINSON, WILLIAMAddress:672 MERIONETH DRIVE672 MERIONETH DRIVECity-St-Zip:FT. WALTON BEACH, FLCity-St-Zip:FT. WALTON BEACH, FL32548

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: WILLIAM ROBINSON PRES 04/03/2009

Electronic Signature of Signing Officer or Director

Date