2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2005
Secretary of State

DOCUMENT# 735013

Entity Name: UNITED WAY OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

518 MULBERRY AVE.
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 586
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number: 59-0863698 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICHARDS, EDWARD T PRES.
518 MULBERRY AVE.
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	STUART, RICK	
Address:	P. O. BOX 59460	
City-St-Zip:	PANAMA CITY, FL 32412	
Title:	D	( ) Delete
Name:	SPANGENBERG, JR., TED	
Address:	1230 E 15TH STREET	
City-St-Zip:	PANAMA CITY, FL 32405	
Title:	TSD	( ) Delete
Name:	SOWELL, JERRY F	
Address:	958 JENKS AVENUE	
City-St-Zip:	PANAMA CITY, FL 32401	
Title:	CD	( ) Delete
Name:	GALLATI, TODD	
Address:	P.O.BOX 15309	
City-St-Zip:	PANAMA CITY, FL 32406	
Title:	D	( ) Delete
Name:	WRIGHT, ED DR	
Address:	4750 COLLEGIATE DRIVE	
City-St-Zip:	PANAMA CITY, FL 32405	
Title:	D	( ) Delete
Name:	CAMPBELL, TERRY	
Address:	1605 COVE BOULEVARD	
City-St-Zip:	PANAMA CITY, FL 32405	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	NORDEN, PETE	
Address:	CALLER BOX 59288	
City-St-Zip:	PANAMA CITY, FL 32412	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	GALLATI, TODD	
Address:	P.O.BOX 15309	
City-St-Zip:	PANAMA CITY, FL 32406	
Title:	CD	(X) Change ( ) Addition
Name:	WRIGHT, ED DR	
Address:	4750 COLLEGIATE DRIVE	
City-St-Zip:	PANAMA CITY, FL 32405	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EDWARD T. RICHARDS PRES 04/01/2005

Electronic Signature of Signing Officer or Director — Date