

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753181

FILED  
Jan 23, 2012  
Secretary of State

**Entity Name:** UNITED WAY OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

5605 HWY 98 S  
LAKELAND, FL 33812 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1357  
HIGHLAND CITY, FL 33846 13

**New Mailing Address:**

**FEI Number:** 59-2116280

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WORTHINGTON, TERRY  
5605 HWY 98 S  
LAKELAND, FL 33812 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: CD  
Name: JAMES, HORTON  
Address: 7401 CYPRESS GARDENS BLVD  
City-St-Zip: WINTER HAVEN, FL 33888

Title: TD  
Name: CARTER, MIKE  
Address: 811 EAST MAIN STREET  
City-St-Zip: LAKELAND, FL 33801

Title: SD  
Name: PAULINE, BROWN  
Address: 3200 LAKELAND HILLS BLVD  
City-St-Zip: LAKELAND, FL 33805

Title: P  
Name: WORTHINGTON, TERRY  
Address: 5605 HWY 98 S  
City-St-Zip: LAKELAND, FL 33812

Title: VPOF  
Name: MARTIN, JILL  
Address: 5605 HWY 98 S  
City-St-Zip: LAKELAND, FL 33812

Title: VPCI  
Name: BORGIA, PENNY  
Address: 5605 HWY 98 S  
City-St-Zip: LAKELAND, FL 33812

I hereby 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 all other like empowered.

SIGNATURE: TERRY WORTHINGTON

PRES

01/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date