

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764448

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** UNITED CEREBRAL PALSY PROPERTIES OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

2912 NORTH E ST.  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

2912 NORTH E ST.  
PENSACOLA, FL 32501

**New Mailing Address:**

**FEI Number:** 59-0737912      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

WHITE, SHERRY A.  
2912 NORTH E STREET  
PENSACOLA, FL 325011324 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: VD  
Name: HUGGINS, W. BRAD  
Address: 605 W. GARDEN ST.  
City-St-Zip: PENSACOLA, FL 32501

Title: D  
Name: FIELDER, MICHELE W  
Address: 70 N BAYLEN STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: TD  
Name: ASMAR, JOHN F  
Address: 1306 E. CERVANTES ST.  
City-St-Zip: PENSACOLA, FL 32501

Title: D  
Name: OVERSTREET, RAISA  
Address: 815 S. PALAFOX ST.  
City-St-Zip: PENSACOLA, FL 32502

Title: CD  
Name: CAUSEY, ANNA M  
Address: 2704 N. 12TH AVENUE  
City-St-Zip: PENSACOLA, FL 32503

Title: SD  
Name: LINTNER, BARRY  
Address: 6310 PALAFOX ST.  
City-St-Zip: PENSACOLA, FL 32503

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: ANNA M. CAUSEY

CD

02/18/2010

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

\_\_\_\_\_  
Date