2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#764448

FILED Jan 10, 2011 Secretary of State

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

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

2912 NORTH E ST. PENSACOLA, FL 32501

Current Mailing Address: New Mailing Address:

2912 NORTH E ST. PENSACOLA, FL 32501

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

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

WHITE, SHERRY A. 2912 NORTH E STREET PENSACOLA, FL 325011324 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD

Name: HUGGINS, W. BRAD Address: 605 W. GARDEN ST. City-St-Zip: PENSACOLA, FL 32501

Title: D

Name: BELL, BRIAN P SR
Address: 33 WEST GARDEN STREET
City-St-Zip: PENSACOLA, FL 32502

Title: TD

 Name:
 ASMAR, JOHN F

 Address:
 1306 E. CERVANTES ST.

 City-St-Zip:
 PENSACOLA, FL 32501

Title: SD

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

Title:

Name: SMITH, NORMAN D
Address: ONE ENERGY PLACE
City-St-Zip: PENSACOLA, FL 32520

Title: VD

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: W. BRAD HUGGINS CD 01/10/2011