

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 29, 2008 8:00 am**  
**Secretary of State**

07-29-2008 90034 036 \*\*\*138.75

**DOCUMENT # L06000055641**

1. Entity Name  
**UNITED WAY OF ESCAMBIA COUNTY FOUNDATION,  
LLC**



Principal Place of Business  
**1301 WEST GOVERNMENT STREET  
PENSACOLA, FL 32501**

Mailing Address  
**1301 WEST GOVERNMENT STREET  
PENSACOLA, FL 32501**

**60045862**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07172008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEUCHTMAN, GARY B  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32502**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75  
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME NORMAN, JEAN  
STREET ADDRESS 1301 WEST GOVERNMENT STREET  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Change ☒ Addition  
NAME MARTHA ANN HUNTER  
STREET ADDRESS 1301 W. GOVERNMENT  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Delete  
NAME TIMBERLAKE, STEVE  
STREET ADDRESS 1301 WEST GOVERNMENT STREET  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Change ☒ Addition  
NAME GWEN APPLEQUIST  
STREET ADDRESS 1301 W. GOVERNMENT  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☒ Delete  
NAME LEUCHTMAN, GARY B  
STREET ADDRESS 1301 WEST GOVERNMENT STREET  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Change ☒ Addition  
NAME KATHIE JEFFORD  
STREET ADDRESS 1301 W. GOVERNMENT  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☒ Delete  
NAME SPEARS, MARY ELLEN  
STREET ADDRESS 1301 WEST GOVERNMENT STREET  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Change ☒ Addition  
NAME FLACK LOGAN  
STREET ADDRESS 1301 W. GOVERNMENT  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Delete  
NAME APPELYARD, JOHN  
STREET ADDRESS 1301 WEST GOVERNMENT STREET  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Change ☒ Addition  
NAME LEWIS DUMMAN  
STREET ADDRESS 1301 W. GOVERNMENT  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Delete  
NAME KAHN, SUZANNE  
STREET ADDRESS 1301 WEST GOVERNMENT STREET  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MGR ☐ Change ☒ Addition  
NAME REN SEDLACEK  
STREET ADDRESS 1301 W. GOVERNMENT  
CITY-ST-ZIP PENSACOLA, FL 32501

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

*JEAN NORMAN* *Jan Norman* 7/24/08