2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N01000005361

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

Current Principal Place of Business:

2912 NORTH E ST
PENSACOLA, FL 325011324 US

New Principal Place of Business:

Current Mailing Address:

2912 NORTH E ST
PENSACOLA, FL 325011324 US

New Mailing Address:

FEI Number: 59-3749163 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WHITE, SHERRY A DR.
2912 NORTH E ST
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: CD ( ) Delete
Name: RITCHIE, BUZZ
Address: 41 N. JEFFERSON ST., SUITE 102
City-St-Zip: PENSACOLA, FL 32501

Title: VD ( ) Delete
Name: FIELDER, MICHELE
Address: 70 N. BAYLEN ST.
City-St-Zip: PENSACOLA, FL 32501

Title: TD ( ) Delete
Name: ASMAR, JOHN
Address: PO BOX 13113
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: ASMAR, JOHN
Address: 1306 E. CERVANTES ST.
City-St-Zip: PENSACOLA, FL 32501

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BUZZ RITCHIE CD 03/27/2009

Electronic Signature of Signing Officer or Director — Date