2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006804

FILED Jan 17, 2007 Secretary of State

Entity Name: UNITED WAY 2-1-1 OF MANASOTA, INC.

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

1445 2ND ST

SARASOTA, FL 34236

Current Mailing Address: New Mailing Address:

1445 2ND ST

SARASOTA, FL 34236

FEI Number: 20-0262358 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:

WILSON, MICHAEL J SUAREZ, ALBERTO 200 S ORANGE AVE 1445 2ND STREET

SARASOTA, FL 34236 US SARASOTA, FL 34236 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: ALBERTO SUAREZ 01/17/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: C/D () Delete Title: C/D (X) Change () Addition

 Name:
 NASH, JOHN
 Name:
 PIKE, NANCY

 Address:
 4502 CORTEZ RD W
 Address:
 420 BAYNARD DR

 City-St-Zip:
 BRADENTON, FL 34210
 City-St-Zip:
 SARASOTA, FL 34285

Title: T/D () Delete Title: T/D (X) Change () Addition

 Name:
 KOONTZ, GERARD F SR.
 Name:
 GUYRE, DALE

 Address:
 5812 9TH AVE. DR. W.
 Address:
 303 13TH AVE E

 City-St-Zip:
 BRADENTON, FL 34209
 City-St-Zip:
 BRADENTON, FL 34208

Title: S/D () Delete Title: S/D (X) Change () Addition

Name: YOUNG, ALEXANDER L Name: MISLYAN, STEVE Address: 1655 SPRING CREEK DR. Address: 501 BAY ISLES

City-St-Zip: SARASOTA, FL 34239 City-St-Zip: LONGBOAT KEY, FL 34230

I hereby certify that the information supplied with this filing does not qualify for the 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: ALBERTO SUAREZ ED 01/17/2007