

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006804

FILED
Jan 07, 2009
Secretary of State

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

Current Principal Place of Business:

1445 2ND ST
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1445 2ND ST
SARASOTA, FL 34236

New Mailing Address:

PO BOX 458
SARASOTA, FL 34230

FEI Number: 20-0262358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUAREZ, ALBERTO
1445 2ND STREET
SARASOTA, FL 34236 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: C/D () Delete
Name: GUYRE, DALE
Address: 1864 17TH ST
City-St-Zip: SARASOTA, FL 34234

Title: V/D () Delete
Name: BARRON, JACKIE
Address: PO BOX 1410
City-St-Zip: TAMPA, FL 33601

Title: T/D () Delete
Name: LAROZA, ADRAINE
Address: 5131 MANATEE AVE W
City-St-Zip: BRADENTON, FL 34210

Title: S/D () Delete
Name: KOHL-HELBIG, LAUREN
Address: 1800 2ND STREET
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: S/D (X) Change () Addition
Name: KOHL, LAUREN
Address: 1800 2ND STREET
City-St-Zip: SARASOTA, FL 34236

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: ALBERTO SUAREZ

ED

01/07/2009

Electronic Signature of Signing Officer or Director

Date