

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N16529

1. Entity Name

UNITED WAY OF OKEECHOBEE COUNTY, INC.

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90010 010 ****61.25

Principal Place of Business

Mailing Address

C/O JOHN D. CASSELS, JR.
400 N.W. SECOND STREET
OKEECHOBEE FL 34972-4106

C/O JOHN D. CASSELS, JR.
400 N.W. SECOND STREET
OKEECHOBEE FL 34972-4106

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2767181

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASSELS, JOHN D., JR.
400 N.W. SECOND STREET
OKEECHOBEE FL 33472

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.

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 \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IRBY, FRANK 1796 HWY 441 N OKEECHOBEE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAFFERTY, STEVE 3551 HWY 441 S OKEECHOBEE FL 34974	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLAIR, CATHY 100 SW 5TH AVE OKEECHOBEE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WILSON, PATTI P O BOX 218 N/A OKEECHOBEE FL 34973	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COBURN, LOU 3551 HWY 441 S OKEECHOBEE FL 34974	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOWERS, KAREN 2801 S. HWY 441 OKEECHOBEE FL 34974	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BOWERS, KAREN 2801 Highway 441 South Okeechobee, FL 34974	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ANDERSON, SCOTT 205 N. Parrott Ave. Okeechobee, FL 34972	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MCWHORTER, PATRICIA 2801 Highway 441 South Okeechobee, Florida 34974	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LAFFERTY, JENNIFER 3551 Highway 441 South Okeechobee, Florida 34974	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, PATTI 307 N.W. 5th Avenue Suite A Okeechobee, Florida 34972	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAFFERTY STEVE 3551 Highway 441 S Okeechobee, FL 34974	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Attachment # N16529

UNITED WAY OF OKEECHOBEE COUNTY, INC

Attachment 1

D
ABNEY, JOHN
PO Drawer 700
Okeechobee, Florida 34973

D
PERONA, LOREENE
1796 Highway 441 North
Okeechobee, Florida 34972

D
BASS, JOANNE
16205 N. Highway 98
Okeechobee, Florida 34972

D
SMITH, STEVE
815 S. Parrott Avenue
Okeechobee, Florida 34974

D
BLAIR, CATHLEEN J
700 S.W. 2nd Avenue
Okeechobee, Florida 34974

D
Watford, Michele
1796 Highway 441 North
Okeechobee, Florida 34972

D
COBURN, LOU
3551 Highway 441 South
Okeechobee, Florida 34974

D
WISE, PAULETTE
3261 Highway 441 South
Okeechobee, Florida 34974

D
IRBY, FRANK
1796 Highway 441 N
Okeechobee, Florida 34972

D
KIRK, JIM
700 S.W. 2nd Avenue
Okeechobee, Florida 34974