


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2008 8:00 am
Secretary of State

07-14-2008 90033 017 ****61.25

DOCUMENT # N22165 1. Entity Name UNITED FAMILIES OF AMERICA, INC.					
Principal Place of Business 720 FAIRBANKS FERRY ROAD TALLAHASSEE, FL 32312			Mailing Address POST OFFICE BOX 37277 TALLAHASSEE, FL 32315-7277		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2952622	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
MCINTYRE, VERA 720 FAIRBANKS FERRY RD TALLAHASSEE, FL 32312				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MCINTYRE, VERA L 720 FAIRBANKS FERRY RD TALLAHASSEE, FL 32312 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP WALKER, CHRISS 3110 PASCO STREET TALLAHASSEE, FL 32305 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WILSON, ROOSEVELT 5020 VALLEY FARM ROAD TALLAHASSEE, FL 32303 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CHAP HALL, ANTHONY 4292 CARNWATH ROAD TALLAHASSEE, FL 32303 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MEADERS, STACEY 1912 VINEYARD WAY TALLAHASSEE, FL 32317 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 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: Vera L. McIntyre (President) 7/1/08 (850) 893-8677 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

40110882

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2008 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the 'Continue' button at the bottom to generate the annual report form.

**** The document number, business name and file date cannot be changed on the report. ****

Document Number N22165

Business Entity Name UNITED FAMILIES OF AMERICA, INC.

Original File Date 08/21/1987

FEI Number 59-2952622

Principal Address 720 FAIRBANKS FERRY ROAD
TALLAHASSEE, FL 32312

Mailing Address POST OFFICE BOX 37277
TALLAHASSEE, FL 323157277

VERA MCINTYRE
Registered Agent 720 FAIRBANKS FERRY RD
TALLAHASSEE, FL 32312 US

Officer/Director Name And Address

P
VERA L MCINTYRE
720 FAIRBANKS FERRY RD
TALLAHASSEE, FL 32312

VP
CHRISS WALKER
3110 PASCO STREET
TALLAHASSEE, FL 32305

T
ROOSEVELT WILSON
5020 VALLEY FARM ROAD
TALLAHASSEE, FL 32303

CHAP
ANTHONY HALL
4292 CARNWATH ROAD
TALLAHASSEE, FL 32303

S
STACEY MEADERS
1912 VINEYARD WAY
TALLAHASSEE, FL 32317

No changes

If all of the above
information is correct and
you do not wish to make

If you need to make
changes to the above
information, please