

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41612

FILED  
Mar 24, 2009  
Secretary of State

**Entity Name:** UNITED WAY OF THE BIG BEND, INC.

**Current Principal Place of Business:**

307 E. SEVENTH AVENUE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

307 E. SEVENTH AVENUE  
TALLAHASSEE, FL 32303

**New Mailing Address:**

**FEI Number:** 59-6011150

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARMSTRONG, KENNETH S  
307 E. SEVENTH AVENUE  
TALLAHASSEE, FL 32303 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: VD ( ) Delete  
Name: PATTY, JENNIFER  
Address: 307 E 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: TD ( ) Delete  
Name: FONVIELLE, DAVID  
Address: 307 E 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32302

Title: PD ( ) Delete  
Name: RAMSAY, DAVID  
Address: 307 E 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: MD ( ) Delete  
Name: ARMSTRONG, KENNETH  
Address: 307 E 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: SD ( ) Delete  
Name: WILLIAMS, JOHANNA  
Address: 307 E 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TD (X) Change ( ) Addition  
Name: WEBSTER, BARRY  
Address: 307 E 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32302

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

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

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

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: KENNETH ARMSTRONG

MD

03/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date