NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am Secretary of State

DOCUMENT # 1099 000007189 1. Entity Name			05-28-2002 91743 049 ****61.25			
UniTED FOR FAMILI	\sim					
DO NOT WRITE	672302					
2. Principal Place of Business 1485 S SEMORAN BLVD 3. Mailing Address 1485 S SEMORAN BLVD		0	7		•	
1485 S SEMORAN BLVO 1485 S SEMORA Suite, Apt. #, etc. Suite, Apt. #, etc.		40 Prac	DO NOT WRITE IN THIS SPACE			
Svite 1448 Svite 1448			4. FEI Number Applied For		Applied For	
City & State Winter Back, FL	Winter Park	City & State Winter Park, FC		59 3616410 Not Applicable		
Zip Country 32792 US	Zip 32792	Country	5. Certificate of State		3.75 Additional e Required	
2012			7. Name and Addres	s of Current Registered A	gent	
Name 5			Jim Patrick			
DO NOT W	Street Address (P.O. Box Number is Not Acceptable)					
IN THIS SPACE		Suite 1448				
		City	City Winter Park FL Zip Code 32792			
8. The above named entity submits this statement for	or the purpose of changing its regis	stered office or regist		e state of Florida.		
*						
SIGNATURE				DATE	-	
Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Regi	istered Agent signature requir	red when reinstating)	DATE		
FEE IS \$61.25 Initial or Amended UBR 9. Election Campaig Trust Fund Contri			\$5.00 May Be Added to Fees	Make Check I Department		
10. OFFICERS AND D	IRECTORS			·		
TITLE NAME		TITLE NAME			CR2E037B (12/01)	
STREET ADDRESS (SER GATACHED)		STREET ADDRESS			78 (
CHT-SI-ZIP		CITY-ST-ZIP			——————————————————————————————————————	
TITLE NAME	ľ	NAME			à	
STREET ADDRESS		STREET ADDRESS CITY-ST-ZIP				
CITY-ST-ZIP		LILTE	. 4	. 40		
NAME		NAME				
SINCEL NODICES		STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE			
TITLE		TITLE	INI T	IN THIS SPACE		
NAME -		NAME STREET ADDRESS		IN THIS STACE		
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP				
TITLE		TITLE				
NAME CTREET ADDRESS	Į	NAME STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	1	CITY-ST-ZIP				
TITLE		TITLE			İ	
NAME STREET ADDRESS		NAME STREET ADDRESS				
CITY-ST-ZIP		CITY-ST-ZIP		<u> </u>		
12 1 hereby certify that the information supplied wi		ion stated in	Casting 110 07/2\/i\ Elo	ride Statutos, Lifurther certif	v that the information	

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

5-15-02

321-397-3000 Daytime Phone Hachment HN9900007189
United for Families 672302
Board of Directors

Diane DeMark - President

1253 Via Del Mar Winter Park, FL 32789 407-629-8752

Charles Visalli

1990 Keystone Blvd. North Miami, FL 33181 305-895-3981

Chad Collins

2326 SW Frisco Ter Port Saint Lucie, FL 34953 772-979-2977

Marjorie Silberman

PO Box 12957 Fort Pierce, FL 34979 772-781-9654 Louis Boccabella - Secretary

153 Cavalier Street Palm Bay, FL 32909 321-728-7090

Craig Norris

4813 Harvest Glen Court Fredericksburg, VA 22408 540-891-8090

Jo-Ann Prisco

2641 SW Tanforan Blvd Port Saint Lucie, FL 34987 772-343-0064

Theresa Garbarino-May

272 SE Twig Avenue Port Saint Lucie, FL 34983 772-873-0341