2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: UNITED CEREBRAL PALSY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

3305 S. ORANGE AVENUE
ORLANDO, FL 32806

Current Mailing Address:

3305 S. ORANGE AVENUE
ORLANDO, FL 32806 US

FEI Number: 59-0799925

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILKINS, ILENE
3305 S. ORANGE AVENUE
ORLANDO, FL 32806 US

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

Officer/Director Detail :

Title	CHAIR	Title	TREASURER
Name	SOS, TONY	Name	SELLERS, ANDREW
Address	3305 S. ORANGE AVENUE	Address	3305 S. ORANGE AVENUE
City-State-Zip:	ORLANDO FL 32806	City-State-Zip:	ORLANDO FL 32806
Title	PRESIDENT, CEO	Title	SR DIRECTOR OF FINANCE
Name	WILKINS, ILENE	Name	ROBLES, SONIA M
Address	3305 S. ORANGE AVENUE	Address	3305 S. ORANGE AVENUE
City-State-Zip:	ORLANDO FL 32806	City-State-Zip:	ORLANDO FL 32806

I hereby 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 all other like empowered.

SIGNATURE: SONIA ROBLES — SR DIRECTOR OF FINANCE — 01/10/2017

Electronic Signature of Signing Officer/Director Detail — Date