2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2014
Secretary of State
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Entity Name: UNITED CEREBRAL PALSY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1221 WEST COLONIAL DRIVE
300
ORLANDO, FL 32804

Current Mailing Address:

1221 WEST COLONIAL DRIVE
300
ORLANDO, FL 32804

FEI Number: 59-0799925

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILKINS, ILENE
1221 WEST COLONIAL DRIVE
300
ORLANDO, FL 32804 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	CB
Name	BROWN, PAUL
Address	338 W. MORSE BLVD.
City-State-Zip:	WINTER PARK FL 32789

Title	SEC
Name	SOS, TONY
Address	719 VASSAR STREET
City-State-Zip:	ORLANDO FL 32804

Title	TREA
Name	DEVLIN, BUTCH
Address	668 PICKFAIR TERRACE
City-State-Zip:	LAKE MARY FL 32746

Title	P
Name	WILKINS, ILENE
Address	1221 WEST COLONIAL DRIVE. STE 300
City-State-Zip:	ORLANDO FL 32804

Title	CFO
Name	GRIFFING, JERRY
Address	1221 WEST COLONIAL DRIVE 300
City-State-Zip:	ORLANDO FL 32804

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: JERRY GRIFFING CFO 01/27/2014

Electronic Signature of Signing Officer/Director Detail — Date