2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712944

Entity Name: UNITED ARTS OF CENTRAL FLORIDA, INC.

FILED
Jan 18, 2017
Secretary of State
CC0191223819

Current Principal Place of Business:

2450 MAITLAND CENTER PARKWAY

SUITE 201

MAITLAND, FL 32751

Current Mailing Address:

2450 MAITLAND CENTER PARKWAY SUITE 201 MAITLAND, FL 32751 US

FEI Number: 59-1166446 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEELE, JULIANA M 2450 MAITLAND CENTER PARKWAY SUITE 201 MAITLAND, FL 32751 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 CHAIRMAN Title EX OFFICIO

NameGRONO-NOWRY, JEANNameLANDMAN GONZALEZ, LINDAAddress315 GROVELAND STAddress8701 MAITLAND SUMMIT BLVD

City-State-Zip: ORLANDO FL 32804 City-State-Zip: ORLANDO FL 32810

Title PRESIDENT Title SECRETARY

Name GARCIA, FLORA MARIA Name QUIGLEY, JENNIFER

Address 2450 MAITLAND CENTER PARKWAY Address 201 N MAGNOLIA AVE

SUITE 201

City-State-Zip: MAITLAND FL 32751

Title DIRECTOR

Name BRITT, HOWARD

Name BONIFAY, CECELIA

Address 420 S ORANGE AVE Address 501049 WILLA SPRINGS DR SUITE 1001

420 S ORANGE AVE SUITE 1001 SUITE 1200

City-State-Zip: WINTER SPRINGS FL 32708

Title DIRECTOR

Name GILBERT, SUZANNE
Name FAHMIE, DEBBIE

Address 200 S ORANGE AVE
Address 817 BILL BECK BLVD SUITE 2600

City-State-Zip: KISSIMMEE FL 34744 City-State-Zip: ORLANDO FL 32801

Continues on page 2

City-State-Zip:

ORLANDO FL 32801

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: JULIANA STEELE

CFO

01/18/2017

Officer/Director Detail Continued:

Title DIRECTOR ALTERNATE. TRUSTEE ALTERNATE Title DIRECTOR

Name GOODWIN, MARCIA HOPE Name HARRINGTON, ROSEANN E

Address PO BOX 4990

City-State-Zip:

Title

100 W ANDERSON ST ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32802-4990 City-State-Zip:

Title DIRECTOR

ORLANDO FL 32839

TRUSTEE, DIRECTOR

CONSTANTINE, HON. LEE HENSLEY, EDWARD Name Name

Address 1101 E FIRST ST Address 4700 MILLENIA BLVD

SUITE 500 City-State-Zip: SANFORD FL 32771

Address

Title

DIRECTOR, TRUSTEE

Title DIRECTOR, TRUSTEE

Title DIRECTOR, TRUSTEE JENKINS, TONY Name JENKINS, DR. BARBARA Name

610 CRESCENT EXECUTIVE CT Address

Address PO BOX 271 SUITE 600

LAKE MARY FL 32746 City-State-Zip: City-State-Zip: ORLANDO FL 32802

Title DIRECTOR Title DIRECTOR, TRUSTEE ALTERNATE

Name MOORE, CHRISTINE Name LARTONOIX. PAUL

Address PO BOX 271 5013 CYPRESS BRANCH POINT Address

City-State-Zip: ORLANDO FL 32801 City-State-Zip: OVIEDO FL 32765

Title DIRECTOR **EX OFFICIO** Title

Name PEREZ-KELLEY, PENELOPE Name OLSON, TERRENCE

Address 215 E LIVINGSTON ST Address PO BOX 1393

ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32802 City-State-Zip:

Title **CFO DIRECTOR** Title

STEELE, JULIANA M Name WILSON, KATE Name

Address 2450 MAITLAND CENTER PARKWAY 800 N MAGNOLIA AVE Address

SUITE 201 City-State-Zip: ORLANDO FL 32803

City-State-Zip: MAITLAND FL 32751

Title **DIRECTOR** Name ALTMIRE, JASON Name DUDA, JUDITH

4800 DEERWOOD CAMPUS PKY Address Address 1721 REBEL RUN City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: OVIEDO FL 32765

DIRECTOR Title Title DIRECTOR

MCGEE, ANN DR. Name SANDLER, RICHARD DR. Name Address 100 WELDON BLVD Address 13535 NEMOURS PARKWAY

City-State-Zip: SANFORD FL 32773-6119 City-State-Zip: ORLANDO FL 32827

Title DIRECTOR Title DIRECTOR Name BAKER, PAUL Name BLANC, DAVID

6400 SANGER RD Address Address 6251 CHANCELLOR DR City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32809

Title DIRECTOR, TRUSTEE Title VICE PRESIDENT, TRUSTEE

Name GHERTNER, STEPHANIE Name MACPHEE, JIM Address 200 SHOWBIZ BLVD Address 1000 DARDEN CENTER DR

City-State-Zip: ORLANDO FL 32837 City-State-Zip: LAKE BUENA VISTA FL 32830

Title DIRECTOR, TRUSTEE Title **TREASURER**

Name O'KEEFE, DANIEL

Address 1210 S ORLANDO AVE
SUITE 1600

City-State-Zip: ORLANDO FL

Title DIRECTOR, TRUSTEE
Name HUBBARD, BONNIE

Address PO BOX 40

City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR

Name LYNCH, S. BRENDAN

Address 215 N EOLA DR

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name SHEEHAN, KAREN

Address 14901 S ORANGE BLOSSOM TR

City-State-Zip: ORLANDO FL 32837

Title DIRECTOR, TRUSTEE

Name GINSBURG, ALAN

Address 700 W MORSE BLVD

SUITE 220

City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR

Name JONHNSON, STACEY DR.

Address 701 N ECONLOCKHATCHEE TR

BLDG 3, RM 108

City-State-Zip: ORLANDO FL 32825

Title DIRECTOR
Name BLOCK, BONNY

255 S ORANGE AVE

SUITE 1100

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Address

Name IOPPOLO, FRANK

Address 250 INTERNATIONAL PKY

SUITE 250

City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR
Name TERRY, JOSEPH

Address 450 S ORANGE AVE

10TH FL

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name ZAMAN, RIZWAN
Address PO BOX 948606

City-State-Zip: MAITLAND FL 32794

Name THOMPSON, HON. JENNIFER

Address 201 S ROSALIND AVE

5TH FLOOR

City-State-Zip: ORLANDO FL 32802

Title DIRECTOR

Name JONES, MARK

Address 1414 KUHL AVE

City-State-Zip: ORLANDO FL 32806

Title DIRECTOR
Name O'DELL, DIANE

Address 1000 UNIVERSAL STUDIOS PLAZA

City-State-Zip: ORLANDO FL 32819

Title DIRECTOR

Name DELOACH, ANDREA
Address 1403 E GORE ST
City-State-Zip: ORLANDO FL 32806

Title DIRECTOR

NameMCCLELLAND, LESLIEAddress5700 TRINITY PREP LANECity-State-Zip:WINTER PARK FL 32792

Title DIRECTOR

Name ARROYO, SHARON
Address 3300 EXCHANGE PL
MAIL CODE NP3D

City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR

Name HOLLANDER, DANIELLE SABA

Address 6277 SEA HARBOR DR

SUITE 400

City-State-Zip: ORLANDO FL 32821

Title DIRECTOR

Name MEADOR, LARRY

Address 1485 INTERNATIONAL PARKWAY

3RD FL

City-State-Zip: HEATHROW FL 32746

Title DIRECTOR

Name VASCONCELLOS, ALOYSIO

Address 8628 VIA ANCHO RD

City-State-Zip: BOCA RATON FL 33433