

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712944

**Entity Name:** UNITED ARTS OF CENTRAL FLORIDA, INC.**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** SECRETARY  
**Name** QUIGLEY, JENNIFER  
**Address** 201 N MAGNOLIA AVE  
**City-State-Zip:** ORLANDO FL 32801**Title** DIRECTOR  
**Name** BRITT, HOWARD  
**Address** 1049 WILLA SPRINGS DR  
SUITE 1001  
**City-State-Zip:** WINTER SPRINGS FL 32708**Title** DIRECTOR ALTERNATE, TRUSTEE  
ALTERNATE  
**Name** GOODWIN, MARCIA HOPE  
**Address** PO BOX 4990  
**City-State-Zip:** ORLANDO FL 32802-4990**Title** DIRECTOR, TRUSTEE  
**Name** MOORE, HON. CHRISTINE  
**Address** 201 S ROSALIND AVE 5TH FL  
**City-State-Zip:** ORLANDO FL 32801**Title** DIRECTOR  
**Name** BONIFAY, CECELIA  
**Address** 420 S ORANGE AVE  
SUITE 1200  
**City-State-Zip:** ORLANDO FL 32802**Title** DIRECTOR  
**Name** FAHMIE, DEBBIE  
**Address** 958 FLORIDA PARKWAY  
**City-State-Zip:** KISSIMMEE FL 34743**Title** DIRECTOR, TRUSTEE  
**Name** JENKINS, DR. BARBARA  
**Address** PO BOX 271  
**City-State-Zip:** ORLANDO FL 32802**Title** EX OFFICIO  
**Name** OLSON, TERRENCE  
**Address** PO BOX 1393  
**City-State-Zip:** ORLANDO FL 32802**Continues on page 2**

*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 M. .STEELE

INTERIM CEO, CFO

03/04/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name PEREZ-KELLEY, PENELOPE  
Address 215 E LIVINGSTON ST  
City-State-Zip: ORLANDO FL 32801

Title CFO, INTERIM CEO  
Name STEELE, JULIANA M  
Address 2450 MAITLAND CENTER PARKWAY  
SUITE 201  
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR, TRUSTEE  
Name GHERTNER, STEPHANIE  
Address 1000 DARDEN CENTER DR  
City-State-Zip: ORLANDO FL 32837

Title DIRECTOR, TRUSTEE  
Name HUBBARD, BONNIE  
Address PO BOX 40  
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR  
Name O'DELL, DIANE  
Address 1000 UNIVERSAL STUDIOS PLAZA  
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR, TRUSTEE  
Name MCMURRIN, MARC  
Address 700 W MORSE BLVD  
SUITE 220  
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR  
Name GIVOGLU, WENDY DR.  
Address 701 N ECONLOCKHATCHEE TR  
BLDG 3, RM 108  
City-State-Zip: ORLANDO FL 32825

Title DIRECTOR  
Name HOLLANDER, DANIELLE SABA  
Address 6277 SEA HARBOR DR  
SUITE 400  
City-State-Zip: ORLANDO FL 32821

Title DIRECTOR, TRUSTEE  
Name TERRY, JOSEPH  
Address 450 S ORANGE AVE  
10TH FL  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name LOPEZ, WILSON  
Address 1170 TREE SWALLOW DR SUITE 341

Title IMMEDIATE PAST CHAIR, EX OFFICIO  
Name WILSON, KATE  
Address 800 N MAGNOLIA AVE  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name SANDLER, RICHARD DR.  
Address 13535 NEMOURS PARKWAY  
City-State-Zip: ORLANDO FL 32827

Title VC  
Name O'KEEFE, DANIEL  
Address 1210 S ORLANDO AVE  
SUITE 1600  
City-State-Zip: ORLANDO FL

Title CHAIRMAN  
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  
Name CARNEY, LESLIE  
Address 5700 TRINITY PREP LANE  
City-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, TRUSTEE  
Name ANCORA-BROWN, TAJIANA  
Address 1375 BUENA VISTA BLVD  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title DIRECTOR  
Name JONES, MARK  
Address 52 W UNDERWOOD ST  
City-State-Zip: ORLANDO FL 32806

Title DIRECTOR  
Name HARRISON, MALIKA  
Address 8701 MAITLAND SUMMIT BLVD  
City-State-Zip: ORLANDO FL 32810

Title DIRECTOR

City-State-Zip: WINTER SPRINGS FL 32708

Title DIRECTOR

Name PERRY JR, HON. BELVIN

Address 20 N ORANGE AVE 16TH FL  
PO BOX 4979

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name GONZALEZ, LINDA LANDMAN

Address 8701 MAITLAND SUMMIT BLVD

City-State-Zip: ORLANDO FL 32810

Title DIRECTOR, EX OFFICIO

Name HARRINGTON, ROSEANN

Address 201 S ROSALIND AVE 5TH FL

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name KING, CHARLES

Address 420 S ORANGE AVE  
STE 1050

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name BARRIOS, CARLOS

Address 189 S ORANGE AVE  
STE 1700

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR, TRUSTEE

Name GOULD, PAM

Address 445 W AMELIA ST

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name PACE, DEBRA DR

Address 817 BILL BECK BLVD

City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR

Name FERRONE, LINDA

Address 100 W ANDERSON ST

City-State-Zip: ORLANDO FL 32802

Name RUIZ-HAYS, MARIA

Address 6277 SEA HARBOR DR

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name HARDMAN, JODIE

Address 390 N ORANGE AVE  
100

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name MCCALL, MERCEDES

Address 349 W OAK ST

City-State-Zip: KISSIMMEE FL 34741

Title TREASURER

Name ABT, LINDSAY

Address 200 S ORANGE AVE  
STE 2800

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name BAUGH, MARCELENE

Address 315 GROVELAND ST

City-State-Zip: ORLANDO FL 32804

Title DIRECTOR

Name MOORE, JEFFREY

Address CAH 191

City-State-Zip: ORLANDO FL 32816

Title DIRECTOR

Name PENGRA, MATTHEW

Address 3300 UNIVERSITY BLVD

City-State-Zip: WINTER PARK FL 32792