

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723706

Entity Name: UNITED WAY OF MARTIN COUNTY, INC..**Current Principal Place of Business:**10 SE CENTRAL PARKWAY
SUITE 101
STUART, FL 34994**Current Mailing Address:**PO BOX 362
STUART, FL 34995**FEI Number:** 23-7273540**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VOJCSIK, JAMES P
10 SE CENTRAL PARKWAY
SUITE 101
STUART, FL 34994 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	SEC
Name	VOJCSIK, JAMES P
Address	10 SE CENTRAL PARKWAY
City-State-Zip:	STUART FL 34995

Title	DIRECTOR
Name	KINANE, TIM
Address	1503 RIVERSIDE DRIVE
City-State-Zip:	STUART FL 34994

Title	TREA
Name	BLACKARD, LYNN
Address	701 COLORADO AVE
City-State-Zip:	STUART FL 34994

Title	VP
Name	ALBURY, AMY
Address	700 UNIVERSE BLVD
City-State-Zip:	JUNO BEACH FL

Title	DIRECTOR
Name	ADEMIL, CASTRILLO
Address	301 SE OCEAN BLVD
City-State-Zip:	STUART FL 34994

Title	VC
Name	HASTINGS, CHAD
Address	615 SW ST. LUCIE CRESCENT #107
City-State-Zip:	STUART FL

Title	DIRECTOR
Name	MOWAD, ELIAS
Address	PO BOX 109600 MS 704-43
City-State-Zip:	WEST PALM BEACH FL

Title	PRESIDENT
Name	RANIERI, STACEY
Address	1251 SW 27TH STREET SUITE 4
City-State-Zip:	STUART FL

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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: JAMES P VOJCSIK

CEO

01/08/2015

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP
Name STILES, CRYSTAL
Address CEA/JB 700 UNIVERS BLVD
City-State-Zip: JUNO BEACH FL

Title DIRECTOR
Name CEBELAK, JANE
Address 3209 VIRGINIA AVENUE
City-State-Zip: FORT PIERCE FL 34950

Title VP
Name STILES, CRYSTAL
Address 10 SE CENTRAL PARKWAY
SUITE 101
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name LAMAR-SARNO, TERESA
Address 10 SE CENTRAL PARKWAY
SUITE 101
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name ANDERSON, KHERRI
Address SUPERVISOR OF ELECTIONS
MARTIN LUTHER KING BLVD
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name CEBELAK, JANE
Address IRSC
3209 VIRGINIA AVENUE
City-State-Zip: FORT PIERCE FL 34950

Title DIRECTOR
Name SCOTT, RACHEL
Address 4684 SE WILLIAMS WAY
City-State-Zip: STUART FL 34987

Title DIRECTOR
Name VANOVER, ROBYN
Address 500 EAST OCEAN BLVD
City-State-Zip: STUART FL

Title DIRECTOR
Name COOK, LILLIAN
Address 10 SE CENTRAL PARKWAY
SUITE 101
City-State-Zip: STUART FL 34994

Title VC
Name KRYZDA, TARYN
Address 10 SE CENTRAL PARKWAY
SUITE 101
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name GAYLORD, LAURIE
Address 10 SE CENTRAL PARKWAY
SUITE 101
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name CAMPENNI, TOM
Address 700 SW ST LUCIE CRESCENT
City-State-Zip: STUART FL 34994

Title VC
Name PERRON, KIMBERLY
Address 2513 NW CRYSTAL LAKE DRIVE
City-State-Zip: JENSEN BEACH FL 34957

Title DIRECTOR
Name SHAFFER, CHUCK
Address 19136 DAWNWOOD COURT
City-State-Zip: STUART FL 33458