## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 740625** 

Entity Name: UNITED CEREBRAL PALSY OF SOUTHWEST FLORIDA, INC.

FILED Feb 05, 2014 Secretary of State CC7460002757

## **Current Principal Place of Business:**

9040 SUNSET DRIVE MIAMI. FL 33173

## **Current Mailing Address:**

9040 SUNSET DRIVE MIAMI, FL 33173 US

FEI Number: 59-1796622 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

LEECH, LESLIE WJR 9040 SUNSET DRIVE SUITE A MIAMI, FL 33173 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 D Title D

Name MCMACKIN, F J III Name WEINGER, STEVEN M

Address 9040 SUNSET DRIVE Address 2650 SW 27TH AVENUE, 2ND FL

City-State-Zip: MIAMI FL 33173 City-State-Zip: MIAMI FL 33133

Title D Title I

Name WETHERINGTON, GLORIA A Name LEECH, LES JR

Address 9040 SUNSET DRIVE Address 9040 SUNSET DR. SUITE A

City-State-Zip: MIAMI FL 33173 City-State-Zip: MIAMI FL 33173

Title ST

Name WEEKS, JAMES G

Address 9040 SUNSET DR. SUITE A

City-State-Zip: MIAMI FL 33173

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: LESLIE W. LEECH, JR.

**PRESIDENT** 

02/05/2014