

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751686

FILED
Apr 26, 2011
Secretary of State

Entity Name: LEGAL ADVOCACY CENTER OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

315 MAGNOLIA AVE, STE A
SANFORD, FL 327711915

New Principal Place of Business:

310 S MAGNOLIA AVE
SANFORD, FL 32771

Current Mailing Address:

128 ORANGE AVE, STE 300
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 59-2013486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UCC FILING & SEARCH SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: GOODSON, RHODA B
Address: 150 MAGNOLIA AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VP
Name: HATCHER, MARY
Address: 222 S FLORIDA ST
City-St-Zip: BUSHNELL, FL 33513

Title: S
Name: ARTHUR, THERESA
Address: 3744 W RAILROAD AVE
City-St-Zip: COCOA, FL 32926

Title: T
Name: GOODBLATT, AMY
Address: 831 IRMA AVENUE
City-St-Zip: ORLANDO, FL 32803

Title: D
Name: MASON, JOSEPH
Address: 101 SOUTH MAIN STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: D
Name: BIRD, CHRISTINE
Address: 108 NORTH MAGNOLIA AVENUE, SUITE 600
City-St-Zip: OCALA, FL 34475

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: RHODA BESS GOODSON

P

04/26/2011

Electronic Signature of Signing Officer or Director

_____ Date