

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

DOCUMENT# 711555

**Entity Name:** COMMUNITY LEGAL SERVICES OF MID-FLORIDA, INC.

**Current Principal Place of Business:**

122 E. COLONIAL DRIVE, SUITE 200  
ORLANDO, FL 32801

**Current Mailing Address:**

122 E. COLONIAL DRIVE, SUITE 200  
ORLANDO, FL 32801 US

**FEI Number:** 59-1156260

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

UCC FILING & SEARCH SERVICES  
1574 VILLAGE SQUARE BLVD  
SUITE 100  
TALLAHASSEE, FL 32309 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 DIRECTOR  
Name HAMILTON-SMITH, CYNTHIA  
Address 417 E 2ND ST  
City-State-Zip: SANFORD FL 32771

Title DIRECTOR  
Name COLOMBO, JOSEPH  
Address 2020 W EAU GALLIE BLVD  
STE 106  
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR  
Name CHANNELL, WARREN  
Address 160 S MAIN ST  
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR  
Name MILLER, MELISSA  
Address 5001 ST JOHNS AVE  
City-State-Zip: PALATKA FL 32177

Title DIRECTOR  
Name MASON, JOSEPH  
Address 101 S MAIN ST  
City-State-Zip: BROOKSVILLE FL 34601

Title DIRECTOR  
Name PARRISH, CHRISTINE  
Address 9815 BUCKHEAD COURT  
City-State-Zip: WINDERMERE FL 34786

Title CEO  
Name HARVEY, JEFFREY  
Address 122 E. COLONIAL DRIVE  
SUITE 200  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name WASYLIK, MICHAEL  
Address P.O. BOX 2245  
City-State-Zip: DADE CITY FL 33526

**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:** JEFFREY HARVEY

CEO

07/15/2020

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           ARGENTO, JAMES  
Address        550 W. MAIN STREET  
City-State-Zip: TAVARES FL 32778

Title           PRESIDENT  
Name           ROSS ANDINO, KEVIN  
Address        307 CRANES ROOST BLVD.  
                SUITE 2010  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title           DIRECTOR  
Name           ARCHER, TANGIE  
Address        128 ORANGE AVE.  
                300  
City-State-Zip: DAYTONA BEACH FL 32114

Title           DIRECTOR  
Name           THACKER DORN, CELIA  
Address        101 CHURCH STREET  
City-State-Zip: KISSIMMEE FL 34741

Title           DIRECTOR  
Name           VICKERS, WYNN  
Address        110 NW 1ST AVENUE  
                SUITE 5000  
City-State-Zip: OCALA FL 34475

Title           DIRECTOR  
Name           SOMERS, DIANA  
Address        14272 NICKELODEON STREET  
City-State-Zip: BROOKSVILLE FL 34613

Title           DIRECTOR  
Name           KOLODINSKY, RICHARD  
Address        1305 N. ATLANTIC AVE.  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title           DIRECTOR  
Name           TAYLOR, JANELL  
Address        1912 NW 1ST ST.  
City-State-Zip: OCALA FL 34475

Title           DIRECTOR  
Name           NIX, SAKEENA  
Address        2750 DAVID WALKER DRIVE  
                2117  
City-State-Zip: EUSTIS FL 32726

Title           DIRECTOR  
Name           HUNTER STORY, MAX  
Address        328 2ND AVE. NORTH  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title           DIRECTOR  
Name           GAR BUTT, EUNICE  
Address        128 ORANGE AVENUE  
                SUITE 300  
City-State-Zip: DAYTONA BEACH FL 32114

Title           VP  
Name           AKIN, SHERRI  
Address        101 N WOODLAND BLVD  
                SUITE 212  
City-State-Zip: DELAND FL 32720

Title           DIRECTOR  
Name           ORTIZ, ANDREA  
Address        37 N ORANGE AVENUE  
                SUITE 500  
City-State-Zip: ORLANDO FL 32801

Title           SECRETARY  
Name           OWENS, SCOTT  
Address        2488 E MICHIGAN STREET  
City-State-Zip: ORLANDO FL 32806

Title           DIRECTOR  
Name           RENTZ, CARRIE  
Address        P. O. BOX 1113  
City-State-Zip: WINTER PARK FL 32790-1113

Title           DIRECTOR  
Name           LAFONTAINE, AMY  
Address        200 S. ORANGE AVE.  
                1200  
City-State-Zip: ORLANDO FL 32801

Title           DIRECTOR  
Name           O'BERRY, TARNECIA  
Address        122 E. COLONIAL DRIVE  
                200  
City-State-Zip: ORLANDO FL 32801

Title           DIRECTOR  
Name           BROWN, CASSANDRA  
Address        9624 SEAVIEW DRIVE  
                206  
City-State-Zip: LEESBURG FL 34788