

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736668

FILED
Feb 25, 2016
Secretary of State
CC4490670406

Entity Name: LEGAL SERVICES OF NORTH FLORIDA, INC.

Current Principal Place of Business:

2119 DELTA BOULEVARD
TALLAHASSEE, FL 32303

Current Mailing Address:

2119 DELTA BOULEVARD
TALLAHASSEE, FL 32303 US

FEI Number: 51-0197090

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KNAB, KRISTINE E
2119 DELTA BLVD
TALLAHASSEE, FL 32303 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 CUMMINGS, CAROLYN
Address 462 WEST BREVARD STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name LANNON, M. CATHERINE
Address 6728 LAYTON COURT
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name MARGULES, JOEL
Address 721 GEORGIA AVENUE
City-State-Zip: PANAMA CITY FL 32404

Title DIRECTOR
Name DIX, MARTIN
Address PO BOX 1877
City-State-Zip: TALLAHASSEE FL 32302

Title DIRECTOR
Name CHAVIS, TONYA
Address 1511 PAYNE STREET
City-State-Zip: TALLAHASSEE FL 32303

Title PRESIDENT, DIRECTOR
Name GERTZ, SALLY C.
Address FSU COLLEGE OF LAW
City-State-Zip: TALLAHASSEE FL 32306

Title DIRECTOR
Name LOQUASTO, WENDY
Address 1201 HAYES STREET
SUITE 100
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name SMITH, PHIL
Address 490 WEST WALNUT STREET
City-State-Zip: MONTICELLO FL 32344

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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: KRISTINE E. KNAB

EXECUTIVE DIRECTOR

02/25/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BATTLE, JOANNE
Address 4768 WOODVILLE HWY
APT. 1138
City-State-Zip: TALLAHASSEE FL 32305

Title DIRECTOR
Name HILL, OLIVER SR.
Address 2537 BRIGHTON ROAD
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name WHITEHEAD, L. YVONNE
Address 9114 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name THOMPSON, DANIEL H
Address 125 S. GADSDEN ST, STE 300
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name MITCHELL, SKIP
Address 2001 MARQUESAS LANE
City-State-Zip: PENSACOLA FL 32506

Title DIRECTOR
Name SHEPPARD, JULIE L.
Address 40 S ALCANIZ ST
City-State-Zip: PENSACOLA FL 32502

Title CEO
Name KNAB, KRISTINE E.
Address 2119 DELTA BLVD
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name GRAY, BARRY
Address 303-B LOVEJOY ROAD
City-State-Zip: FT. WALTON BEACH FL 32548

Title PRESIDENT, DIRECTOR
Name SIMS, DEREK
Address 10041 BLUE WATERS ROAD
City-State-Zip: TALLAHASSEE FL 32305

Title VP, DIRECTOR
Name GORDON, RENEE
Address 5508 HAMPTON WOODS WAY
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR
Name HAMBY, MICHAEL
Address 1201 EGLIN PARKWAY
City-State-Zip: SHALIMAR FL 32579

Title SECRETARY, TREASURER,
DIRECTOR
Name ZOTTOLI, STEPHANIE
Address 2640-A MITCHAM DR
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name BRIGHT, TRAVIS A. JR.
Address 6 W GARDEN ST, STE 714
City-State-Zip: PENSACOLA FL 32502