

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736668

**FILED**  
**Mar 10, 2014**  
**Secretary of State**  
**CC3368814982**

**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 SECRETARY, TREASURER,  
DIRECTOR  
Name LANNON, 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 ANDERSON, JOAN H  
Address 3424 MONITOR LANE  
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR  
Name BEDNAR, MARK  
Address PO DRAWER 13146  
City-State-Zip: PENSACOLA FL 32591-3146

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

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

**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: KRISTINE E. KNAB**

**EXECUTIVE DIRECTOR**

**03/10/2014**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GUTTMANN, MICHAEL  
Address 314 SOUTH BAYLEN STREET  
SUITE 201  
City-State-Zip: PENSACOLA FL 32502-5949

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

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

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

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

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

Title DIRECTOR  
Name CAYSON, PAMELA  
Address 7640 CHESTERFIELD ROAD  
City-State-Zip: PENSACOLA FL 32506

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

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, YVONNE  
Address 9114 MICCOSUKEE ROAD  
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR  
Name RITCHIE, WILLIAM J  
Address 447 LEGENDARY DRIVE, STE. 202  
City-State-Zip: DESTIN FL 32541

Title DIRECTOR  
Name JACKSON, FATIMAH  
Address 850 CANTON CIRCLE, APT 6  
City-State-Zip: TALLAHASSEE FL 32301

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