#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 736668** 

Entity Name: LEGAL SERVICES OF NORTH FLORIDA, INC.

FILED Mar 02, 2015 Secretary of State CC7198024993

# **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 Title SECRETARY, TREASURER,

DIRECTOR

DIRECTOR

DIRECTOR

Name CUMMINGS, CAROLYN

Name LANNON, CATHERINE

Address 462 WEST BREVARD STREET

Address 6728 LAYTON COURT

City-State-Zip: TALLAHASSEE FL 32301

City-State-Zip: TALLAHASSEE FL 32317

Title

Title

Title DIRECTOR

 Name
 MARGULES, JOEL
 Name
 DIX, MARTIN

 Address
 721 GEORGIA AVENUE
 Address
 PO BOX 1877

City-State-Zip: PANAMA CITY FL 32404 City-State-Zip: TALLAHASSEE FL 32302

Title DIRECTOR

NameANDERSON, JOAN HNameBEDNAR, MARKAddress3424 MONITOR LANEAddressPO DRAWER 13146

City-State-Zip: TALLAHASSEE FL 32312 City-State-Zip: PENSACOLA FL 32591-3146

Title DIRECTOR Title PRESIDENT, DIRECTOR

Name CHAVIS, TONYA Name GERTZ, SALLY

Address 1511 PAYNE STREET Address FSU COLLEGE OF LAW

City-State-Zip: TALLAHASSEE FL 32303 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 03/02/2015

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 CEO

Name KNAB, KRISTINE E

Address 2119 DELTA BOULEVARD City-State-Zip: TALLAHASSEE FL 32303 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 HAMBY, MICHAEL
Address 1201 EGLIN PARKWAY
City-State-Zip: SHALIMAR FL 32579