## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 751686** 

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

FILED
Jun 11, 2020
Secretary of State
9722486019CC

# **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: 59-2013486 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

UCC FILING & SEARCH SERVICES, INC. 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 Title DIRECTOR

Name HAMILTON-SMITH, CYNTHIA Name COLOMBO, JOSEPH

Address 417 E 2ND ST Address 2020 W EAU GALLIE BLVD

City-State-Zip: SANFORD FL 32771

City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR Title DIRECTOR

 Name
 CHANNELL, WARREN
 Name
 MILLER, MELISSA

 Address
 160 S MAIN ST
 Address
 5001 ST JOHNS AVE

City-State-Zip: WINTER GARDEN FL 34787 City-State-Zip: PALATKA FL 32177

Ony State 2p. TALATTA TE 32177

Title DIRECTOR Title DIRECTOR

NameMASON, JOSEPHNamePARRISH, CHRISTINEAddress101 S MAIN STAddress9815 BUCKHEAD COURT

City-State-Zip: BROOKSVILLE FL 34601 City-State-Zip: WINDERMERE FL 34786

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 WASYLIK, MICHAEL
 Name
 ELKIN, BARRY

Address P. O. BOX 2245 Address 12515 SPRING HILL DR.
City-State-Zip: DADE CITY FL 33526 City-State-Zip: SPRING HILL FL 34609

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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: JEFFREY HARVEY CEO

06/11/2020

### Officer/Director Detail Continued:

Title TREASURER

Name ARGENTO, JAMES
Address 550 W. MAIN STREET

City-State-Zip: TAVARES FL 32778

Title PRESIDENT

Address

Name ROSS ANDINO, KEVIN

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 RENTZ, CARRIE

Address P.O. BOX 1113

City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR

Name O'BERRY, TARNECIA
Address 122 E. COLONIAL DRIVE

SUITE 200

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name BROWN, CASSANDRA
Address 122 E. COLONIAL DRIVE

SUITE 200

City-State-Zip: ORLANDO FL 32801

Title CEO

Name HARVEY, JEFFREY
Address 122 E. COLONIAL DRIVE

SUITE 200

Title DIRECTOR

Name HUNTER STORY, MAX Address 328 2ND AVE. NORTH

City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR

Name EUNICE, GARBUTT
Address 128 ORANGE AVE.

300

City-State-Zip: DAYTONA BEACH FL 32114

Title VP

Name AKIN, SHERRI

Address 600 W. NEW YORK AVENUE

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 7180 SUMMIT DRIVE

City-State-Zip: WINTER HAVEN FL 33884

Title DIRECTOR

Name KOLODINSKY, RICK

Address 1305 N. ATLANTIC AVENUE

City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR

Name TAYLOR, JANELL

Address 122 E. COLONIAL DRIVE

SUITE 200

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name NIX, SAKEENA

Address 122 E. COLONIAL DRIVE

SUITE 200

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name LAFONTAINE, AMY

Address 200 S. ORANGE AVENUE

**SUITE 1200** 

City-State-Zip: ORLANDO FL 32801

City-State-Zip: ORLANDO FL 32801