

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751686

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

FILED
Jan 12, 2017
Secretary of State
CC6550410103

Current Principal Place of Business:

128 ORANGE AVE.
300
DAYTONA BEACH, FL 32114

Current Mailing Address:

128 ORANGE AVE
SUITE 300
DAYTONA BEACH, FL 32114

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
Name GOODBLATT, AMY
Address 1040 WOODCOCK RD
SUITE 251
City-State-Zip: ORLANDO FL 32803

Title SECRETARY
Name HAMILTON-SMITH, CYNTHIA
Address 417 E 2ND ST
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name RUDNITSKY, TARAS
Address 3383 OAKMONT TERRACE
City-State-Zip: LONGWOOD FL 32779

Title D
Name ARAGO, MAUREEN
Address PO BOX 452275
City-State-Zip: KISSIMMEE FL 34745

Title D
Name HUBKA, HAROLD
Address PO BOX 2491
City-State-Zip: DAYTONA BEACH FL 32115

Title D
Name VALLADARES, KARLA
Address 2295 S HIAWASSEE RD
STE 301
City-State-Zip: ORLANDO FL 32835

Title D
Name LASSONE, ROBERT
Address 100 SILVER BEACH AVE
City-State-Zip: DAYTONA BEACH FL 32118

Title DIRECTOR
Name COLOMBO, JOSEPH
Address 2351 W EAU GALLIE BLVD
City-State-Zip: MELBOURNE FL 32935

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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: KIMBERLY SANCHEZ

CEO

01/12/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title D
Name MCNEAL, RAYMOND
Address 2640 SE 45TH ST
City-State-Zip: OCALA FL 34480

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

Title DIRECTOR
Name MILLER, BRENT
Address 205 E. BURLEIGH BLVD., HWY 441
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name AKIN, SHERRILLE
Address 101 N. WOODLAND BLVD.
218
City-State-Zip: DELAND FL 32720

Title DIRECTOR
Name ELKIN, BARRY
Address 12515 SPRING HILL DR.
City-State-Zip: SPRING HILL FL 34609

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

Title D
Name ADAMS, TIMOTHY
Address 5530 PENDLETON DR
City-State-Zip: ORLANDO FL 32839

Title TREASURER
Name PARRISH, CHRISTINE
Address 200 S. ORANGE AVE.
STE. 800
City-State-Zip: ORLANDO FL 32801

Title CEO
Name SANCHEZ, KIMBERLY
Address 128 ORANGE AVE
SUITE 300
City-State-Zip: DAYTONA BEACH FL 32114

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

Title DIRECTOR
Name HAWKINS-SMITH, LORETTA
Address 128 ORANGE AVE.
300
City-State-Zip: DAYTONA BEACH FL 32114