

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003551

Entity Name: CENTRAL FLORIDA TRIAL LAWYERS ASSOCIATION, INC.

Current Principal Place of Business:

51 E. JEFFERSON ST. #4349
ORLANDO, FL 32802

Current Mailing Address:

P.O. BOX 4349
ORLANDO, FL 32802 US

FEI Number: 16-1745530

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOLEY, JACQUELINE A
51 E. JEFFERSON ST. #4349
ORLANDO, FL 32802 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: JACQUELINE A. COOLEY

05/01/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR
Name COOLEY, JACQUELINE A
Address 51 E. JEFFERSON #4349
City-State-Zip: ORLANDO FL 32802

Title IMMEDIATE PAST PRESIDENT
Name GORDON, ESQ., JAMES T ESQ.
Address 313 SOUTH CENTRAL AVENUE
City-State-Zip: OVIEDO FL 32765

Title DIRECTOR
Name TRETO, ESQ., ROBIN ESQ.
Address 111 NORTH ORANGE AVENUE
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name ALPIZAR, DAVID M. ESQ.
Address 1528 PALM BAY ROAD NORTHEAST
City-State-Zip: PALM BAY FL 32905

Title PRESIDENT
Name ANDREWS, ESQ., JENNIFER M ESQ.
Address 2600 EAST ROBINSON STREET
City-State-Zip: ORLANDO FL 32803

Title PRESIDENT ELECT
Name ANTHONY-SMITH, ESQ., CORETTA ESQ.
Address 1711 AMAZING WAY
City-State-Zip: OCOEE FL 34761

Title TREASURER
Name GILBERT, JONATHAN T ESQ.
Address 801 NORTH ORANGE AVENUE 830
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name SHIELDS, LAURA LEE
Address 7335 W SAND LAKE RD SUITE #300
City-State-Zip: ORLANDO FL 32819

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: COOLEY, JACQUELINE A

EXECUTIVE DIRECTOR

05/01/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SMITH, ESQ., DANIEL
Address 5840 SOUTH SEMORAN BOULEVARD
City-State-Zip: ORLANDO FL 32822

Title DIRECTOR
Name MOKWA, ESQ., MATTHEW
Address 398 WEST MORSE BOULEVARD
200
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name TOTH, ESQ., ADRIENN
Address 20 NORTH ORANGE AVENUE
1600
City-State-Zip: ORLANDO FL 32801

Title SECRETARY
Name WARNER, ESQ., DEBORAH
Address 5200 SOUTH US HIGHWAY 17 92
City-State-Zip: CASSELBERRY FL 32707

Title DIRECTOR
Name GRAHAM-WILLIAMS, ESQ., TRAKINA
Address 2620 EAST ROBINSON STREET
City-State-Zip: ORLANDO FL 32803