

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000002682

Entity Name: CENTRAL FLORIDA FAMILY LAW INN, INC.

Current Principal Place of Business:

1217 MOUNT VERNON ST
ORLANDO, FL 32803

Current Mailing Address:

1217 MOUNT VERNON ST
ORLANDO, FL 32803 US

FEI Number: 47-1017104

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEMIDUK, HANNAH
1217 MOUNT VERNON ST
ORLANDO, FL 32803 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: HANNAH DEMIDUK

03/28/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PAST PRESIDENT
Name TENNIS, DIANA HON
Address 425 N ORANGE AVE STE 1100
ORLANDO, FL 5
City-State-Zip: ORLANDO FL 32801

Title TREASURER
Name MOUSER, CARSON
Address 390 N ORANGE AVE STE 1825
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name GROSSMAN, AJ
Address 1217 MOUNT VERNON ST
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name DEITSCH, TERIS
Address 815 N MAGNOLIA AVE SUITE 300
City-State-Zip: ORLANDO FL 32810

Title DIRECTOR
Name TRUETT, LORNA
Address 631 S. ORLANDO AVENUE
SUITE 301
City-State-Zip: WINTER PARK FL 32789

Title VP
Name MARTELL, JOSH
Address 618 E SOUTH ST STE 110
City-State-Zip: ORLANDO FL 32801

Title PRESIDENT
Name HAMLIN, AMY
Address 2 COURTHOUSE SQ
City-State-Zip: KISSIMMEE FL 34741

Title SECRETARY
Name HALL, NATALIE D
Address 4767 NEW BROAD STREET
City-State-Zip: ORLANDO FL 32814

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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: HANNAH DEMIDUK

ADMINISTRATOR

03/28/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LAURANT, GISELLA HON
Address 425 N ORANGE AVE
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name MALEC, MEGAN
Address 3101 MAGUIRE BLVD STE 100
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name DANE, JENNIFER
Address 201 MAITLAND AVE
SUITE1011
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title OTHER
Name DEMIDUK, HANNAH
Address 1217 MOUNT VERNON ST
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name LOPEZ, FRANCE
Address PO BOX 781426
City-State-Zip: ORLANDO FL 32878

Title DIRECTOR
Name SPRYSENSKI, CHRISTOPHER HON
Address 301 N. PARK AVE
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name VAGHAIWALLA, MICHAEL
Address 631 S. ORLANDO AVE. SUITE 301
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name WINDLE, ANDREW
Address 938 LAKE BALDWIN LN
City-State-Zip: ORLANDO FL 32814