2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000002028

Entity Name: CONFERENCE OF COUNTY COURT JUDGES OF FLORIDA,

INC.

Current Principal Place of Business:

3375 CAPITAL CIR NE #G TALLAHASSEE, FL 32318

Current Mailing Address:

PO BOX 180244

TALLAHASSEE, FL 32318 US

FEI Number: 82-5466420 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HANSARD, CPA, MATTHEW R 3375 CAPITAL CIR NE #G TALLAHASSEE, FL 32318 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

FILED Mar 21, 2024

Secretary of State

6502398850CC

Officer/Director Detail:

Title PAST PRESIDENT Name JEWETT, STEPHEN R Address 425 N ORANGE AVE

STE 385A

City-State-Zip: ORLANDO FL 32801

Title **DIRECTOR**

Name TINLIN, CHARLES J Address 4010 LEWIS SPEEDWAY

City-State-Zip: ST. AUGUSTINE FL 32084

Title PRESIDENT ELECT Name DISTLER, D. MELISSA

Address E. MOODY BLVD, BLDG 1

City-State-Zip: BUNNELL FL 32110

Title DIRECTOR

Name DAVIS, TATUM

945 N. TEMPLE AVENUE Address

STARKE FL 32091 City-State-Zip:

Title SECRETARY

Name PALUCK, TARA

Address 1700 MONROE ST

City-State-Zip: FORT MYERS FL 33901

Title PAST PRESIDENT

THOMPSON, THOMAS P III Name

Address 110 NW FIRST AVE City-State-Zip: OCALA FL 34475

Title **DIRECTOR**

Name JANCEWICZ, STEFANIA Address 2 COURTHOUSE SQUARE

City-State-Zip: KISSIMMEE FL 34741

Title **PRESIDENT**

Name GOTTLIEB, KENNTH Address 201 S.E. 6TH STREET

FT. LAUDERDALE FL 33301 City-State-Zip:

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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.

03/21/2024 SIGNATURE: LISA ALLEN **TREASURER**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name HELM, CHARLES

Address 110 N. APOPKA AVENUE

City-State-Zip: INVERNESS FL 34450

Title DIRECTOR

Name MASON, ANGELA D.

Address 101 E. JAMES LEE BOULEVARD

City-State-Zip: CRESTVIEW FL 32536

Title TREASURER
Name ALLEN, LISA

Address 800 EAST TWIGGS STREET

SUITE 318

City-State-Zip: TAMPA FL 33602

Title DIRECTOR

Name MILLER, CHRIS

Address 101 N. ALABAMA AVENUE

City-State-Zip: DELAND FL 32724

Title DIRECTOR

Name BIGNEY, JEANETTE

Address 425 N. ORANGE AVENUE

City-State-Zip: ORLANDO FL 32801