

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000183

FILED
Mar 06, 2024
Secretary of State
5270404692CC

Entity Name: ACADEMY OF FLORIDA ELDER LAW ATTORNEYS, INC.

Current Principal Place of Business:

3380 BARROW HILL TRAIL
TALLAHASSEE, FL 32312

Current Mailing Address:

3380 BARROW HILL TRAIL
TALLAHASSEE, FL 32312 US

FEI Number: 65-0382251

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOOLEY, JENNIFER L
3380 BARROW HILL TRAIL
TALLAHASSEE, FL 32312 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: JENNIFER L DOOLEY

03/06/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name WILLIAMS, GRADY
Address 1543 KINGSLEY AVE., STE. 5
City-State-Zip: ORANGE PARK FL 32073

Title ADMINISTRATOR
Name DOOLEY, JENNIFER L
Address 3380 BARROW HILL TRAIL
City-State-Zip: TALLAHASSEE FL 32312

Title IMMEDIATE PAST PRESIDENT
Name JORGENSEN, MIKE
Address 2318 PARK STREET
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name RHEINGANS, MATT
Address 1314 E. VENICE AVENUE, SUITE E
City-State-Zip: VENICE FL 34285

Title IMMEDIATE PAST PRESIDENT
Name KIRSON, HEATHER
Address 1407 E. ROBINSON STREET
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name EHRHARDT, AUDREY GAY
Address 1000 THOMASVILLE RD
City-State-Zip: TALLAHASSEE FL 32303

Title PRESIDENT
Name JACOBY, DAVID
Address 2111 DAIRY ROAD
City-State-Zip: MELBOURNE FL 32904

Title DIRECTOR
Name MCGARRY, AMY
Address 1708 CAPE CORAL PARKWAY WEST
SUITE 7
City-State-Zip: CAPE CORAL FL 33914

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: JENNIFER L DOOLEY

ADMINISTRATOR

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name LONG, KOLE
Address 901 CHESTNUT STREET, SUITE C
City-State-Zip: CLEARWATER FL 33763

Title TREASURER
Name NEUFELD, JASON
Address 2641 NE 207TH ST, #100
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name FALLER, DANIELLE
Address 309 N PARSONS AVENUE
City-State-Zip: BRANDON FL 33510

Title DIRECTOR
Name AKIN, JENNIFER
Address 6045 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR
Name ZOLNER, DIANA
Address 880 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title PRESIDENT-ELECT
Name SMALL, COLLETT
Address 2400 N. UNIVERSITY DRIVE, SUITE
209
City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR
Name ARKIN, BRANDON
Address 2605 W ATLANTIC AVE A103
City-State-Zip: DELRAY BEACH FL 33445