

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90360 050 ****61.25

DOCUMENT # 711555

1. Entity Name
COMMUNITY LEGAL SERVICES OF MID-FLORIDA, INC.



Principal Place of Business
**1036 W. AMELIA STREET
ORLANDO, FL 32805 US**

Mailing Address
**128 ORANGE AVE
#A
DAYTONA BEACH, FL 32114 US**

00040010



2. Principal Place of Business
**122 E. Colonial Drive
Suite, Apt. #, etc.
Suite 200
City & State
Orlando, FL
Zip
32801 Country
US**

3. Mailing Address
**128 Orange Avenue
Suite, Apt. #, etc.
Suite 300
City & State
Daytona Beach, FL
Zip
32114 Country
US**

04072006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1156260 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**UCC FILING & SEARCH SERVICES
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORRELL, JOSEPH 1310 W COLONIAL DRIVE ORLANDO, FL 32804 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOODBLATT, AMY 831 IRMA AVENUE ORLANDO, FL 32803 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEAH, RIDDICK 4636 S. MOON TRAIL PORT ORANGE, FL 32129 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEE, HUGH 202 N. FLORIDA ST., STE A BUSHNELL, FL 33513 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARTHUR, THERESA 3744 WEST RAILROAD AVENUE COCOA, FL 32926 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LESTER BOULER, HAROLD 813 EAST BAY STREET WINTER GARDEN, FL 34787 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ☐ Change ☒ Addition Tammes, Virginia 420 South Orange Avenue, Suite 1200 Orlando, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ☐ Change ☒ Addition Porter, Michael 905 Second Street Port Orange, FL 32129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Change ☒ Addition Schulte, Kimberly 127 North 7th Street Leesburg, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Change ☒ Addition Snow, Daniel 203 Courthouse Square Inverness, FL 34450

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rhonda Bess Gordon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/06
Date

386-255-8171
Daytime Phone #

ATTACHMENT

Additions

60029675
711555

TITLE NAME STREET ADDRESS CITY – ST- ZIP	D CAUSSADE-GARCIA, EUNICE 20 SOUTH ROSE AVENUE, SUITE 2 KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D ECKERT, STACY 2445 SOUTH VOLUSIA AVENUE, SUITE C3 ORANGE CITY, FL 32763
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D VALDIVIA, BASIL 200 NORTH ORANGE AVENUE, SUITE 1600 ORLANDO, FL 32802
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D KING, ALICE 4347 NW 22 ND AVENUE OCALA, FL 34475
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D BESS GOODSON, RHODA 150 MAGNOLIA AVENUE DAYTONA BEACH, FL 32114
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D LEITCH, DOUGALD 3113 LAWTON ROAD, SUITE 225 ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D MASON, JOSEPH 101 SOUTH MAIN STREET BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D NOWELL, SID 1003 EAST MOODY BOULEVARD, SUITE E BUNNELL, FL 32110
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D PICCARD, ELIAS 615 A HERNDON AVENUE ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D STEVENS-SINGLETON, JUDY 30 NORTH GROVE STREET, SUITE B MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D THOMPSON, LYVONNE 730 GOLDWYN AVENUE ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D PETTUS-GRUND, LINDA MARIE 125 NORTH HYER AVENUE ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D TOWNSEND, WILLIAM 200 REID STREET PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D WILEY, SHARON 4882 S. SEMORAN BOULEVARD, UNIT 1401 ORLANDO, FL 32822
TITLE NAME STREET ADDRESS CITY – ST- ZIP	D BIRD, CHRISTINE 20 SE MAGNOLIA AVENUE OCALA, FL 34474