

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741786

FILED  
Apr 01, 2009  
Secretary of State

**Entity Name:** CENTRAL FLORIDA ASSOCIATION OF CRIMINAL DEFENSE LAWYERS, INC.

**Current Principal Place of Business:**

P.O. BOX 1017  
ORLANDO, FL 328021017 US

**New Principal Place of Business:**

207 E JEFFERSON ST  
ORLANDO, FL 32801 US

**Current Mailing Address:**

P.O. BOX 1017  
ORLANDO, FL 328021017 US

**New Mailing Address:**

P.O. BOX 1017  
ORLANDO, FL 32802-101 US

**FEI Number:** 59-2972829

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LARR, ROBERT S  
435 N. ORANGE AVE  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LARR, ROBERT S  
Address: 435 N. ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

Title: DP ( ) Delete  
Name: HORNSBY, RICHARD  
Address: 401 N. MILLS SUITE D  
City-St-Zip: ORLANDO, FL 32803

Title: D/T ( ) Delete  
Name: TUMARKIN, DANIEL  
Address: 390 N ORANGE STE 2300  
City-St-Zip: ORLANDO, FL 32801

Title: DS (X) Delete  
Name: KENNEY, JUDITH  
Address: PO BOX 8004  
City-St-Zip: SANFORD, FL 327728004

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: VICKERS, MELLISSA S  
Address: 435 N. ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D/T (X) Change ( ) Addition  
Name: TUMARKIN, DANIEL  
Address: 207 E LIVINGSTON STREET  
City-St-Zip: ORLANDO, FL 32801

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DANIEL W. TUMARKIN

D/T

04/01/2009

Electronic Signature of Signing Officer or Director

Date