


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90056 019 ****61.25

DOCUMENT # 751686 1. Entity Name LEGAL ADVOCACY CENTER OF CENTRAL FLORIDA, INC.					
Principal Place of Business 222 S W BROADWAY ST OCALA, FL 34474			Mailing Address 222 S W BROADWAY ST OCALA, FL 34474		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2013486	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
UCC FILING & SEARCH SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE, FL 32301-2551				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEE, HUGH		NAME		
STREET ADDRESS	109 N. FLORIDA AVE-#207		STREET ADDRESS		
CITY-ST-ZIP	BUSHNELL, FL 335136156		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SNOW, DANIEL J		NAME		
STREET ADDRESS	203 COURTHOUSE SQUARE		STREET ADDRESS		
CITY-ST-ZIP	INVERNESS, FL 34450		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MASON, JOSEPH		NAME		
STREET ADDRESS	P O BOX 1900		STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE, FL 34605		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEEK, TOM		NAME		
STREET ADDRESS	P.O. BOX 2491		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH, FL 32115		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GOODBLATT, AMY		NAME		
STREET ADDRESS	221 NE IVANHOE BLVD., STE 205		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32804		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ECKERT, STACY		NAME		
STREET ADDRESS	2445 SOUTH VOLUSIA AVE., STE C3		STREET ADDRESS		
CITY-ST-ZIP	ORANGE CITY, FL 32763		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 4.22.04 Daytime Phone # _____		

2004 Not For Profit Corporation Annual Report
Legal Advocacy Center of Central Florida, Inc.

Attachment Page 1
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24056532

Block 11, Officers and Directors (continued)

Title	D	Addition
Name	Judy Stevens-Singleton	
Street Address	30 N. Grove St., Ste B	
City-St-Zip	Merritt Island, FL 32953	

Title	D	Addition
Name	Ann Melinda Craggs	
Street Address	101 SW 3 rd Street	
City-St-Zip	Ocala, FL 34474	

Title	D	Addition
Name	Johanna Torres	
Street Address	322 Lakebreeze Circle	
City-St-Zip	Lake Mary, FL 32746	

Title	D	Addition
Name	Ethel Ware	
Street Address	380 St. Regis Drive	
City-St-Zip	Merritt Island, FL 32953-4554	

Title	D	Addition
Name	Dennis Bayer	
Street Address	306 S. Oceanshore Blvd.	
City-St-Zip	Flagler Beach, FL 32136	

Title	D	Addition
Name	William Townsend	
Street Address	200 Reid Street	
City-St-Zip	Palatka, FL 32177	

Title	D	Addition
Name	Dougald Leitch	
Street Address	3113 Lawton Road, Ste 225	
City-St-Zip	Orlando, FL 32803	

Title	D	Addition
Name	Michael Porter	
Street Address	903 Second Street	
City-St-Zip	Port Orange, FL 32119	

Title	VD	Addition
Name	Joseph Morrell	
Street Address	2300 E. Concord Street	
City-St-Zip	Orlando, FL 32803	

Title	D	Addition
Name	Virginia Townes	
Street Address	255 S. Orange Avenue	
City-St-Zip	Orlando, FL 32801	

Title	D	Addition
Name	Bill Rivera	
Street Address	4224 Anson Lane Apt. 104	
City-St-Zip	Orlando, FL 32814	

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24056532

Title	D	Addition
Name	Norberto Katz	
Street Address	425 N. Orange Ave., Ste 540	
City-St-Zip	Orlando, FL 32801	

Title	D	Addition
Name	Lucille Espey-Francis	
Street Address	355 West Alfred Street	
City-St-Zip	Tavares, FL 32775	

Title	D	Addition
Name	Mercedes Leon	
Street Address	20 South Rose Ave., Ste 2	
City-St-Zip	Kissimmee, FL 34741	

Title	D	Addition
Name	Mildred Dixon	
Street Address	1089 N. Circle West	
City-St-Zip	Winter Garden, FL 34787	

Title	D	Addition
Name	Lyvonne Thompson	
Street Address	728 Goldwyn Avenue	
City-St-Zip	Orlando, FL 32805	

Title	D	Addition
Name	Sharon Wiley	
Street Address	4882 S. Semoran, Unit 1401	
City-St-Zip	Orlando, FL 32822	

Title	D	Addition
Name	Alice King	
Street Address	4347 NW 22 nd Avenue	
City-St-Zip	Ocala, FL 34475	

Title	SD	Addition
Name	Leah Riddick	
Street Address	4636 S. Moon Trail	
City-St-Zip	Port Orange, FL 32129	