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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 30 AM 9:17

DOCUMENT # N13342 (3)

1. Corporation Name

FLORIDA LAWYERS ASSISTANCE, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/06/1986	3a. Date of Last Report 02/10/1994
4. FEI Number 59-2642210	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

Principal Place of Business		Mailing Address	
% 5353 N. FEDERAL HIGHWAY SUITE 304 FT. LAUDERDALE FL 33308		% 5353 N. FEDERAL HIGHWAY SUITE 304 FT. LAUDERDALE FL 33308	
2. Principal Place of Business	2a. Mailing Address	21. 2601 E. Oakland Park Blvd.	26. 2601 E. Oakland Park Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.	22. Suite 203	27. Suite 203
City & State	City & State	23. Ft. Lauderdale, FL 33306	28. Ft. Lauderdale, FL 33306
Zip	Country	29. 33306	30. Broward
24. 33306	25. Broward	29. 33306	30. Broward

9. Name and Address of Current Registered Agent

KILBY, WILLIAM H.
5353 N. FEDERAL HIGHWAY
SUITE 304
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81. Name	Kilby, William H.
82. Street Address (P.O. Box Number is Not Acceptable)	2601 E. Oakland Park Blvd., Suite 203
83. City	Ft. Lauderdale, FL
84. Zip Code	33306

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: William H. Kilby William H. Kilby, Executive Director 1/23/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	T
NAME	BORROK, VIRGINIA R.
STREET ADDRESS	555 STOCKTON STREET
CITY-ST-ZIP	JACKSONVILLE FL 32204
TITLE	P
NAME	TUTAN, G V
STREET ADDRESS	2900 MIDDLE STR, 5TH FLOOR
CITY-ST-ZIP	MIAMI FL
TITLE	D
NAME	GOETZ, ROGER A.
STREET ADDRESS	POST OFFICE BOX 1881
CITY-ST-ZIP	FERNANDIANA BEACH FL 32034
TITLE	D
NAME	HANRAHAN, MICHAEL E.
STREET ADDRESS	BOX 35042, FEDERAL BLDG.
CITY-ST-ZIP	JACKSONVILLE FL 32202
TITLE	D
NAME	ANDERSON, DUANE
STREET ADDRESS	100 BISCAYNE BLVD #23000
CITY-ST-ZIP	MIAMI FL 33132-2308
TITLE	D
NAME	KILBY, WILLIAM H
STREET ADDRESS	5353 N. FEDERAL HIGHWAY S.304
CITY-ST-ZIP	FT. LAUDERDALE FL 33308

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Treasurer:	☒ Change ☐ Addition
1.2 NAME	G. Miles Davis, Esquire	
1.3 STREET ADDRESS	25 W. Cedar Street, 4th Floor	
1.4 CITY-ST-ZIP	Pensacola, FL 32501	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Executive Director	☒ Change ☐ Addition
6.2 NAME	William H. Kilby	
6.3 STREET ADDRESS	2601 E. Oakland Park Blvd., Suite 203	
6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33306	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William H. Kilby William H. Kilby, Executive Director 1/23/95 305-566-9040
Signature and typed or printed name of signing officer or director (Date) (Type) (Fax #)