

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711555

Entity Name: COMMUNITY LEGAL SERVICES OF MID-FLORIDA, INC.**Current Principal Place of Business:**128 ORANGE AVENUE
SUITE 300
DAYTONA BEACH, FL 32114**Current Mailing Address:**444 SEABREEZE BLVD.
SUITE 150
DAYTONA BEACH, FL 32118 US**FEI Number:** 59-1156260**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**UCC FILING & SEARCH SERVICES
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name HAMILTON-SMITH, CYNTHIA
Address 417 E 2ND ST
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name COLOMBO, JOSEPH
Address 2020 W EAU GALLIE BLVD
STE 106
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name MILLER, MELISSA
Address 5001 ST JOHNS AVE
City-State-Zip: PALATKA FL 32177

Title PRESIDENT
Name PARRISH, CHRISTINE
Address 9815 BUCKHEAD COURT
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name RUDNITSKY, TARAS
Address 3383 OAKMONT TERR.
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name CHANNELL, WARREN
Address 160 S MAIN ST
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name MASON, JOSEPH
Address 101 S MAIN ST
City-State-Zip: BROOKSVILLE FL 34601

Title CEO
Name SANCHEZ, KIMBERLY
Address 128 ORANGE AVENUE
SUITE 300
City-State-Zip: DAYTONA BEACH FL 32114

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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: KIMBERLY SANCHEZ

CEO

03/08/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name WASYLIK, MICHAEL
Address P.O. BOX 2245
City-State-Zip: DADE CITY FL 33526

Title DIRECTOR
Name HURST MILLER, KATHERINE
Address 340 N. CAUSEWAY
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name HUNTER STORY, MAX
Address 328 2ND AVE. NORTH
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR
Name GARBUTT, EUNICE
Address 128 ORANGE AVENUE
SUITE 300
City-State-Zip: DAYTONA BEACH FL 32114

Title TREASURER
Name AKIN, SHERRI
Address 101 N WOODLAND BLVD
SUITE 212
City-State-Zip: DELAND FL 32720

Title DIRECTOR
Name ORTIZ, ANDREA
Address 37 N ORANGE AVENUE
SUITE 500
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name OWENS, SCOTT
Address 2488 E MICHIGAN STREET
City-State-Zip: ORLANDO FL 32806

Title DIRECTOR
Name ELKIN, BARRY
Address 12515 SPRING HILL DR.
City-State-Zip: SPRING HILL FL 34609

Title DIRECTOR
Name ARGENTO, JAMES
Address 550 W. MAIN STREET
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name ROSS ANDINO, KEVIN
Address 2180 SR 434
SUITE 2100
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name ARCHER, TANGIE
Address 128 ORANGE AVE.
300
City-State-Zip: DAYTONA BEACH FL 32114

Title DIRECTOR
Name THACKER DORN, CELIA
Address 101 CHURCH STREET
City-State-Zip: KISSIMMEE FL 34741

Title DIRECTOR
Name SMITH, WYNN
Address 110 NW 1ST AVENUE
SUITE 5000
City-State-Zip: OCALA FL 34475

Title DIRECTOR
Name SOMERS, DIANA
Address 14272 NICKELODEON STREET
City-State-Zip: BROOKSVILLE FL 34613