

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712480

Entity Name: LEE COUNTY LEGAL AID SOCIETY, INC.

Current Principal Place of Business:

2400 FIRST STREET, SUITE 214
FORT MYERS, FL 33901

Current Mailing Address:

2400 FIRST STREET, SUITE 214
FORT MYERS, FL 33901 US

FEI Number: 59-1163686

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BANYAI, ANDREW J.
2400 FIRST STREET, SUITE 214
FORT MYERS, FL 33901 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: ANDREW J. BANYAI, ESQ.

03/29/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name BANYAI, ANDREW J.
Address 2400 FIRST STREET SUITE 214
City-State-Zip: FORT MYERS FL 33901

Title LEGAL DIRECTOR
Name DEMINICO, BLAIR J.
Address 2400 FIRST STREET SUITE 214
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR
Name DINKEL, MATTHEW
Address ALAN WILLIAMS & ASSOC.
INSURANCE AGENCY
13700 SIX MILE CYPRESS PARKWAY
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR, TREASURER
Name PAK-GALVIN, ANASTASIJA
Address 1473 XAVIER AVENUE
City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR
Name RIOS, JASON
Address RIOS LAW GROUP, PA
2241 CLEVELAND AVE
City-State-Zip: FORT MYERS FL 33901-3503

Title DIRECTOR
Name SMITH, DESTINEY
Address LAW OFFICE OF DESTINEY R. SMITH
13410 PARKER COMMONS BLVD
SUITE 101
City-State-Zip: FORT MYERS FL 33912-1867

Title DIRECTOR, VP
Name JOHNSON, LUKE
Address SUNSHINE STATE LAW OFFICE, PLLC
2125 VICTORIA AVE
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR
Name RUSSELL, TRAVIS
Address 2414 NW 24 ST
City-State-Zip: CAPE CORAL FL 33993

Continues on page 2

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: ANDREW J. BANYAI, ESQ.

CEO

03/29/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LEPERA, MARIANNE
Address ELEVANCE HEALTH
8404 SOUTHWIND BAY CIR
City-State-Zip: FORT MYERS FL 33908-6029

Title DIRECTOR
Name ABDULNOUR, BENJAMIN
Address MORGAN & MORGAN
12800 UNIVERSITY DR STE 600
City-State-Zip: FORT MYERS FL 33907-5349

Title DIRECTOR
Name TALTY, PATRICIA
Address 16669 WELLINGTON LAKES CIR
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR
Name CONNOLLY, BRUCE R.
Address 4355 RAFFIA PALM CIR
City-State-Zip: NAPLES FL 34119

Title DIRECTOR
Name TALTY, FRANCIS
Address 16669 WELLINGTON LAKES CIR
City-State-Zip: FORT MYERS FL 33908