

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2000 8:00 a  
Secretary of State

02-07-2000 90064 044 \*\*\*\*61.25

DOCUMENT # N45495

1. Entity Name

THE NORTHEAST FLORIDA CHAPTER OF THE FASHION GRO

Principal Place of Business

Mailing Address

1967 SAN MARCO BLVD.  
JACKSONVILLE FL 32207

1967 SAN MARCO BLVD.  
JACKSONVILLE FL 32207-3211

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2923945

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PROCTOR, SOL H ESQ.  
233 E. BAY STREET  
#1015  
JACKSONVILLE FL 32202

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME PROCTOR, ROCHELLE  
STREET ADDRESS 1967 SAN MARCO BLVD  
CITY-ST-ZIP JACKSONVILLE FL 32207 ☐ Delete

TITLE TD  
NAME HANEY, LAURA TODD  
STREET ADDRESS 1967 SAN MARCO BLVD.  
CITY-ST-ZIP JACKSONVILLE FL 32207 ☒ Delete

TITLE SD  
NAME FARROW, GIGI  
STREET ADDRESS 1967 SAN MARCO BLVD.  
CITY-ST-ZIP JACKSONVILLE FL 32207 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS 2868 EVERCHAMM PI  
CITY-ST-ZIP JACKSONVILLE, FL 32257 ☒ Change

TITLE  
NAME ALFORD, SANDRA  
STREET ADDRESS 1563 ALFORD PI #4  
CITY-ST-ZIP JACKSONVILLE, FL 32207 ☒ Change

TITLE  
NAME  
STREET ADDRESS 8787 Southside Blvd #29.  
CITY-ST-ZIP JACKSONVILLE, FL 32256 ☒ Change

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change

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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*ROCHELLE PROCTOR*

1-25-00

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