

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 790961

1. Entity Name

NORTH FLORIDA GROWERS EXCHANGE

Principal Place of Business

4401 E. COLONIAL DR.
P.O. BOX 140155
ORLANDO FL 32814-0155

Mailing Address

4401 E. COLONIAL DR.
P.O. BOX 140155
ORLANDO FL 32814-0155

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

59-1214190

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROWN, REGINALD L
4401 E COLONIAL DR
ORLANDO FL 32814

7. Name and Address of New Registered Agent

Name

Charles H. Matthews

Street Address (P.O. Box Number is Not Acceptable)

4401 E. Colonial Dr.

City

Orlando

FL

Zip Code
32814

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

Charles H. Matthews

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

(NOTE: Registered Agent signature required when reinstating)

7/18/2000

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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

TITLE DP
NAME BRYNES, DANNY
STREET ADDRESS P O BOX 8 N/A
CITY-ST-ZIP HASTINGS FL 32145 ☐ Delete

TITLE DVP
NAME SMITH, WAYNE
STREET ADDRESS 9345 HASTINGS BLVD
CITY-ST-ZIP HASTINGS FL 32145 ☐ Delete

TITLE STD
NAME COTTON, WILLIAM R
STREET ADDRESS 8650 HASTINGS BLVD
CITY-ST-ZIP HASTINGS FL 32145 ☐ Delete

TITLE AS
NAME BROWN, REGINALD L
STREET ADDRESS 4401 E COLONIAL DR
CITY-ST-ZIP ORLANDO FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS
NAME Matthews, Charles H.
STREET ADDRESS 4401 E. Colonial Drive
CITY-ST-ZIP Orlando, FL 32814 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *William R. Cotton* William R. Cotton

7-14-2000

(904) 692-1941

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sec.-Treas.-Dir.

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

FILED
Jul 26, 2000 8:00 am
Secretary of State

07-26-2000 90003 001 ****61.25

02-09-2000 90082 008 ****61.25