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Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90033 037 ****61.25

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N45495			
1. Entity Name THE FASHION GROUP INTERNATIONAL OF NORTH FLORIDA, INC.			
Principal Place of Business 11111-70 SAN JOSE BLVD. #315 JACKSONVILLE, FL 32223		Mailing Address 11111-70 SAN JOSE BLVD. #315 JACKSONVILLE, FL 32223	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FBI Number 59-2923945		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALFORD, SANDRA R 11111-70 SAN JOSE BL #315 #315 JACKSONVILLE, FL 32223		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable.		DATE _____ (NOTE: Registered Agent signature required when releasing)	
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAHTI, SUSAN 426 MARSH POINT CIRCLE ST. AUGUSTINE, FL 32082 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD YOUNG-GAINES, SUZI P.O. BOX 5425 JACKSONVILLE, FL 32247 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FOWLER, LOVELLA 427 MONTVILLE COURT JACKSONVILLE, FL 32221 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRIMM, WENDY 8836 TILNEY COURT JACKSONVILLE, FL 32217 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALFORD, SANDRA 11111-70 SAN JOSE BLVD. SUITE 315 JACKSONVILLE, FL 32223 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 exemptions contained in Chapter 119, 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4.11.2008 9043985788 Daytime Phone #	