

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000001204

1. Entity Name

FRIENDS OF THE STYLEMARCHERS, INC.

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90044 011 ****61.25

Principal Place of Business

1201 EGLIN PARKWAY
SHALIMAR FL 32579

Mailing Address

1201 EGLIN PARKWAY
SHALIMAR FL 32579-1206

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLEET, H. BART
1201 EGLIN PARKWAY
SHALIMAR FL 32579

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 ☐ Delete
NAME TD
STREET ADDRESS HEMMER, ALLEN R.
CITY-ST-ZIP 22 MAPLE AVE.
SHALIMAR FL

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS McALLISTER, RAY H.
CITY-ST-ZIP 140 COUNTRY CLUB DRIVE
SHALIMAR, FL 32579

TITLE ☐ Delete
NAME D
STREET ADDRESS PATRICK, JEFFERY C.
CITY-ST-ZIP 200 DEVON COURT
FT. WALTON BCH FL

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS HYDER, JEFF
CITY-ST-ZIP 236 YACHT CLUB DRIVE
FT. WALTON BCH, FL 32548

TITLE ☐ Delete
NAME S D
STREET ADDRESS CONNER, TRACY W.
CITY-ST-ZIP 200 RACETRACK RD.
FORT WALTON BEACH FL

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS NELSON, RANDY
CITY-ST-ZIP 2114 WILDERNESS PATH
FT. WALTON BCH, FL 32547

TITLE ☐ Delete
NAME D
STREET ADDRESS FLEET, H. BART
CITY-ST-ZIP 1201 EGLIN PARKWAY
SHALIMAR FL

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS BOUNDS, RICHARD G.
CITY-ST-ZIP 4 BAYSHORE DRIVE
SHALIMAR, FL 32579

TITLE ☐ Delete
NAME D
STREET ADDRESS STEARNS, ALLEN
CITY-ST-ZIP 908 MIDDLE DRIVE
FT WALTON BEACH FL

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS REVILL, SHIRLEY
CITY-ST-ZIP 42 COUNTRY CLUB ROAD
SHALIMAR, FL 32579

TITLE ☐ Delete
NAME PD
STREET ADDRESS KENT, BARBARA
CITY-ST-ZIP 648 MERIONETH DRIVE
FT WALTON BEACH FL

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

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: Allen R Hemmer RECALLED DR. HEMMER MAR. 6, 2000 HOME (850) 651-0926 WORK (850) 882-2864

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)