

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N1000000262

**Entity Name:** NORTHEAST FLORIDA OPTOMETRIC SOCIETY, INC

**Current Principal Place of Business:**

3948 3RD STREET SOUTH  
#41  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

3948 3RD STREET SOUTH  
#41  
JACKSONVILLE BEACH, FL 32250

**FEI Number: 80-0527910**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

O'CONNOR, BRETT DR.  
3948 3RD ST S  
#41  
JACKSONVILLE BEACH, FL 32250 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: BRETT O'CONNOR**

**01/04/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ROGERS, JENNA DR.  
Address 2743 COLLEGE STREET  
City-State-Zip: JACKSONVILLE FL 32205

Title TREASURER  
Name O'CONNOR, BRETT DR.  
Address 11945 SAN JOSE BLVD #202  
City-State-Zip: JACKSONVILLE FL 32223

Title PRESIDENT  
Name COWART, ASHLEY L  
Address 612 MIRAMAR LN  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title SECRETARY  
Name HARRELSON, JAY  
Address 13245 ATLANTIC BLVD #8  
City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR  
Name SOVA, OKSANA  
Address 4712 RIVER CITY DR #107  
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR  
Name AMANDA, BATEH DR.  
Address 3948 3RD STREET SOUTH  
#41  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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: BRETT O'CONNOR**

**TREASURER**

**01/04/2023**

Electronic Signature of Signing Officer/Director Detail

Date