

N170000000487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

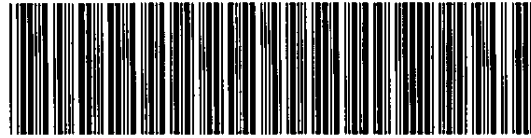
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Retired Educators Association of Flagler County
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee &
Certificate of
Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Betty Tobias
Name (Printed or typed)

12 Bill Place
Address

Palm Coast, FL 32137
City, State & Zip

386-447-3701
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 28, 2016

BETTY TOBIAS
12 BILL PL
PALM COAST, FL 32137

SUBJECT: RETIRED EDUCATORS ASSOCIATION OF FLAGLER COUNTY
(RE AFC), *INC.*
Ref. Number: W16000073333

We have received your document for RETIRED EDUCATORS ASSOCIATION OF FLAGLER COUNTY (RE AFC) and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 816A00023208

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Retired Educators Association of Flagler County, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
12 Bill Place
Palm Coast, Fl. 32137

Mailing address, if different
FILED
17 JAN 10 AM 8:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: 1. to foster and promote the social welfare, as well as educational and philanthropic objectives and needs of retired educators 2. Also, to nurture the relationships that will help us to maintain our linkages to the profession of education. 3. Further, the REAFC shall foster community awareness of its programs through consistent communication opportunities.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Elections to be held every other year in May; the term of office for each officer shall be for a period of two (2) years.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Betty Tobias, Pres.
Address: 12 Bill Place
Palm Coast, FL.
32137

Name and Title: Lee Mason, Membership Chair
Address: 59 Claremount Drive
Flagler Beach, Fl. 32136

Name and Title: Queenester Jones
Recording Secretary
Address: 75 Buttonworth Dr.
#A
Palm Coast, FL. 32137

Name and Title: Jane Whitesell, Asst. Membership
Comm. Chair
Address: 5 Whitestone Lane
Palm Coast, FL. 32137

Name and Title: Alice Lytch, Treasurer
Address: 2 Waser Place
Palm Coast, FL. 32164

Name and Title: Bea Penna, Publicity Coordinator
Address: 43 Woodward Lane
Palm Coast, FL. 32164

Name and Title: Diane Marquis, Historian Name and Title: _____
 Address: 909 Gallberry Court Address: _____
Bunnell, Fl. 32110 _____

 Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Betty Tobias
 Address: 12 Bill Place
Palm Coast, Fl. 32137

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Betty Tobias
 Address: 12 Bill Place
Palm Coast, Fl. 32137

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: January 6, 2017. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Betty Tobias Required Signature of Registered Agent October 15, 2016 Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Betty Tobias Required Signature of Incorporator Nov. 25, 2016 Date