

NO4000008598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

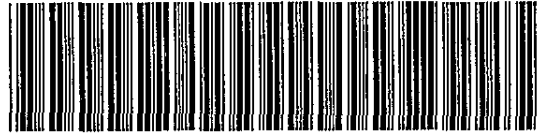
(Business Entity Name)

(Document Number)

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08/09/04--01024--018 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
04 SEP -2 PM 12:11

W04-30490

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TRANSMITTAL LETTER

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

SUBJECT: Haines City Northeast Community Revitalization Group
(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: Morris West
Name (Printed or typed)

2218 North Navel Circle
Address

Haines City FL 33844
City, State & Zip

863-421-3606
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 10, 2004

MORRIS WEST
2218 NORTH NAVAL CIRCLE
HAINES CITY, FL 33844

SUBJECT: HAINES CITY NORTHEAST COMMUNITY REVITALIZATION
GROUP
Ref. Number: W04000030490

We have received your document for HAINES CITY NORTHEAST COMMUNITY REVITALIZATION GROUP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix 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.

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

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of 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) 245-6931.

Becky McKnight
Document Specialist
New Filings Section

Letter Number: 704A00049593

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

ARTICLE I NAME

The name of the corporation shall be:

Haines City Northeast Community
Revitalization Group, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. Box 492
Haines City Florida 33845

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Help Restore a Blighted Community

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

By Voting

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Graham Ben President 1001 Ave "M" Haines City FI 33844
West Morris 2218 N. Navel Circle Haines City, FI 33844 VP
Baker Linda 2204 N. 11th Street Haines City FI 33844 TD
West Monica 1103 N. 21st Street Haines City, FI 33844 DS

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

2218 North Navel Circle
Haines City Florida 33844
Morris West

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ben Graham
1001 Ave "M" Haines City, FI

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.



Signature/Registered Agent

7-29-04

Date



Signature/Incorporator

8-29-04

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 SEP -2 PM 12:11