

P17000043413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

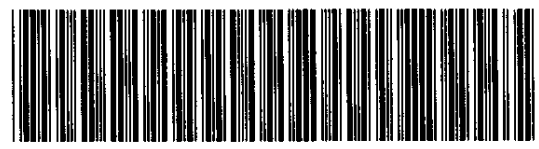
(Business Entity Name)

(Document Number)

Certified Copy \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800298522358

05/01/17--01027--026 \*\*78.75

FILED  
17 MAY 16 AM 9:51  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

W17-037610

05/17/17



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

17 MAY 15 PM 2:24

May 2, 2017

KENNETH GRADY  
P.O. BOX 2121  
JACKSONVILLE, FL 32203

SUBJECT: 40/ACRES COMMUNITY DEVELOPMENT CORPORATION  
Ref. Number: W17000037610

We have received your document for 40/ACRES COMMUNITY DEVELOPMENT CORPORATION 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 document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is N16000003989.

Please return the corrected 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) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 417A00008554

*Handwritten:*  
Jace  
255  
250  
6804

## COVER LETTER

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

SUBJECT:

40 ACRES Community Development Corporation  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

**ADDITIONAL COPY REQUIRED**

FROM:

Kenneth Gentry  
Name (Printed or typed)

P.O. Box 2121  
Address

Jacksville, FL 32203  
City, State & Zip

(904) 545-0751  
Daytime Telephone number

KGentry@bellsouth.net  
E-mail address: (to be used for future annual report notification)

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

**40/ Acres**  
**Community Development Corporation**  
Post Office Box 2121  
Jacksonville, Florida 32203

May 8, 2017

Florida Department of State  
Division of Corporation  
Post Office Box 6327  
Tallahassee, Florida 32314  
Attn: Thomas Chang

Ref: N16000003989  
Dissolution of Non-Profit Entity

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17 MAY 16 AM 9:51  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

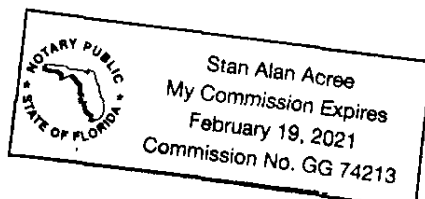
Sir/Madam;

As Incorporator of 40/ Acres Community Development Corporation, a not for profit corporation, I hereby declare the organization has no intent of revoking the filed dissolution thereby releasing the name for use by another entity.

Signed,

Kenneth D. Grady

*Stan Alan Acree*  
Stan Alan Acree  
Notary Public



## COVER LETTER

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

**SUBJECT:** 40/ Acres Community Development Corporation

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Kenneth D. Grady

Name (Printed or typed)

Post Office Box 2121

Address

Jacksonville, Florida 32203

City, State & Zip

904-545-0751

Daytime Telephone number

kdgrady@bellsouth.net

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

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** 40/ Acres Community Development Corporation

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: \_\_\_\_\_

7250 Angela Drive

P.O. Box 2121

Jacksonville, Florida 32222

Jacksonville, Florida 32203

**ARTICLE III PURPOSE**

40/ Acres Community Development Corporation is a community  
The purpose for which the corporation is organized is: \_\_\_\_\_

development company created to plan, design, and develop economically depressed neighborhoods by improving

their organizational and economic infrastructure.

**ARTICLE IV SHARES** 1000

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ricky L. Brown / President

Name and Title: \_\_\_\_\_

Address 7250 Angela Drive

Address: \_\_\_\_\_

Jacksonville, Florida 32222

Name and Title: Kenneth D. Grady / Vice-President

Name and Title: \_\_\_\_\_

Address 2043 Dunsford Terrace #12

Address: \_\_\_\_\_

Jacksonville, Florida 32207

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: Ricky L. Brown \_\_\_\_\_

Address: 7250 Angela Drive \_\_\_\_\_

Jacksonville, Florida 32222 \_\_\_\_\_

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17 MAY 16 AM 9:51  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE VII INCORPORATOR**

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

Name: Kenneth D. Grady \_\_\_\_\_

Address: 2043 Dunsford Terrace #12 \_\_\_\_\_

Jacksonville, Florida 32207 \_\_\_\_\_

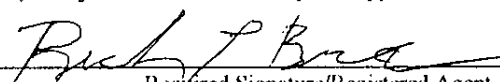
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

  
\_\_\_\_\_  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

  
\_\_\_\_\_  
Date