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2004 AUG -6 A 11: 39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 2, 2004

- -

DAVID M. CVETAN 6013 LANSHIRE DRIVE TAMPA, FL 33634-3033

SUBJECT: MY HOME ANGEL HOUSING ASSISTANCE CORPORATION Ref. Number: W04000029425

We have received your document for MY HOME ANGEL HOUSING ASSISTANCE CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 704A00048112

FILED 2004 AUG -6 A 11: 39 SECRETARY OF STATE

August 5, 2004

From: David M. Cvetan 6013 Lanshire Drive Tampa, Florida 33634-3033

To: Division of Corporations Corporate Records P.O. Box 6327 Tallahassee, Florida 32314

Subject: My Home Angel Housing Assistance Corporation Ref. Number: W04000029425

Please accept my apology for submitting an incomplete application. Our corporate President, Edgar S. Delong Jr., has signed the application and it is again submitted for your consideration.

Respectively,

David M. Cvetan Registered Agent, Florida My Home Angel Housing Assistance Corporation

Enclosures: 1. Division of Corporations letter No. 704A00048112 dated August 2, 2004 2. Signed Application

	TRANSMITTAL LETTER	FILED
TO:	Registration Section Division of Corporations	2004 AUG -6 A 11: 39
SUBJ	ECT: My Home Angel Housing He (Name of Corporation - must include s	ssistance Corposeer TURIDA

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida". "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

David M. Cretan (Name of Person) My Home Angel Housing Assistance Corporation anshire Drive 6013 33634lampa (Addres

(City/State and Zip Code)

For further information concerning this matter, please call:

Javil M. Cretan) 88A -7033 ode & Daytime Telephone Number) at (Name of Person)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallalassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

ICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO **CONDUCT ITS AFFAIRS IN FLORIDA** 1-

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED 1 REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AF THE STATE OF FLORIDA: 200.

Ł.	My Home Angel Housing Assistance Corporation 500 All: 20
	My Home Angel Housing Assistance Corporation (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbre with the Period & 11: 39 import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if the WAMP HOLY OF STATE in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.) Texas
2.	- Texas (State or country under the law of which it is incorporated) (Fel number, if applicable)
4.	(Date of Incorporation) 5. <u>Der De Fua</u> (Duration: Year corp[will cease to exist or "perpetual")
	N/A (Date first conducted affairs in Florida if prior to registration. Sec sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7.	(Principal office address)
	Same (Current mailing address)
8.	To promote home ownership by providing down payment assistance (Purposets) of corporation authorized in home state or country to be carried out in the state of Florida) greents.
9.	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) David M. Cvetan Name: 6013 Lanshire Drive
0	Iffice Address: Tampa, FL 33634-3033
	(City), Florida (Zip Code)

10. Registered Agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered Aent's signature)

11. Attached is a Certificate of Existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

A. DIRECTORS	FILE	ח			
Chamman: Dawiel C. Caswell		_ 1	Nanay	Salemi	
Address: 3008 Durham CF. 200 Rection Rections	AUG -6 A	11:40	eon the	rst Creak	es .
Round Rock TX TYSE	RETARY OF	STATE	Austro,	78 7872	4
Vice Chairman: John R. Faulkner		LURIDA		· -	'د
Address 5408 Western Hills	Drive			·· · ·	
Austin, TX 18731	· · · · · · · · · · · · · · · · · · ·	م. مصفف و بابت بد ومورية ما مقار			. •
Director, Cheri A. Delong					·· _
Mulliess 19 Lost Meadour Trail					
Austin, TX 78738	· · · · · · · · · · · · · · · · · · ·				
Director: Gres Butz	5			• •	
Address: 111 Charlestown Hunt Dr	NR !	,	namh <u>i pri</u> ss.		
Phoenex ville PA 1944	2				
B. OFFICERS			- -		
President Edger S. DeLong Jr.			- %		, .
Address: 19 Lost Meadow Trail	; 			• • • •	. •
Austin, 7x 78738	؛ م من من مر				
Vice President: Chevi A. DeLong	• •	· · ·· ·· · · · ·			••
Malross 19 Lost Meadow Trail			•··· ·		
Austin, TX 78738	j		-*	· · · ·	٠
Sevretary: Nancy Salemi	, , 		. <i></i>		-
Address 407 HUIST Creek BD.	Austri	n TX	787	34	•
Treusurer	en it.				·
Address.	·····				
NOTE: If necessary, you may attach an addendum to the applie	ation listing ad	ditional off	leers and or -	directors.	
13 Signature of Chairman, Vice Chairmen, or any office	r listed in num	ber 12 of th	ac application	1)	··
14. Edgar S- Delong Jr.		Pres	ident	-	
(Typed or printed name and capacity)	or person signi	ng applacas	\${\${}}		

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Geoffrey S. Connor Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for My Home Angel Housing Assistance (filing number: 800327708), a Domestic Nonprofit Corporation, was filed in this office on April 08, 2004.

It is further certified that the entity status in Texas is active.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 20, 2004.



Geoffrey S. Connor

Secretary of State