

F05000001819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000048031280

03/11/05--01020--006 **70.00

03/23/05

FILED
05 MAR 15 PM 12:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SP

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOSHEN MINISTRIES INC.
(Name of Corporation -- must include suffix)

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: _____

MARYAN M. McGRADY
(Name of Person)

GOSHEN MINISTRIES INC.
(Firm/Company)

11485 OAKHURST RD. #200-201

(Address)

LARGO, FL. 33774
(City/State and Zip Code)

FILED
05 MAR 15 PM 12:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

MARYAN M. McGRADY at (727) 517-0789
(Name of Person) (Area Code & Daytime Telephone Number)

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
Tallahassee, 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

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

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

1. GOSHEN MINISTRIES INC.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. DELAWARE 3. 22-3098590
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 02/28/1991 5. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 04/01/2005
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 11485 OAKHURST RD. # 200-201
(Principal office address)
LARGO, FL 33774
(Current mailing address)

8. ORGANIZED EXCLUSIVELY FOR RELIGIOUS + CHARITABLE PURPOSES
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: PAMELA A. REEDER

Office Address: 7050 BAYOU WEST PLACE
PINELLAS PARK, Florida 33782
(City) (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.

Pamela A Reeder
(Registered Agent'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.

FILED
MAR 15 PM 12:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: DREW T. McGRADY

Address: 22852 ANGOLA RD. EAST
LEWES, DE 19958

Vice Chairman: —

Address: —

Director: PHILIP M. McGRADY

Address: 273 BRIDGEVIEW CIRCLE
CHESAPEAKE, VA 23320

Director: —

Address: —

FILED
05 MAR 15 PM 12:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

B. OFFICERS

President: MARYAN M. McGRADY

Address: 11485 OAKHURST RD - 200-201
LARGO, FL 33774

Vice President: —

Address: —

Secretary: ALAN G. McGRADY

Address: TONES FERRY RD, APT A-2, CARRBORO, NC
27510

Treasurer: ALAN G. McGRADY

Address: SEE ABOVE - ADDRESS

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Maryan M. McGrady
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. MARYAN M. McGRADY, PRESIDENT
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

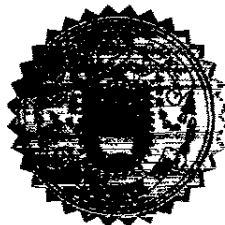
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE CERTIFICATE OF INCORPORATION OF "GOSHEN MINISTRIES INC.", WAS RECEIVED AND FILED IN THIS OFFICE THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 1991.

AND I DO FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS A NON-PROFIT AND NON-STOCK CORPORATION.

FILED
05 MAR 15 PM 12:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA



2256045 8300C

050122326

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3698694

DATE: 02-22-05