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J. BRYAN DEC 8 2005

PHELPS DUNBAR_{LLP}
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Tupelo, Mississippi 38802-1220
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Tupelo, MS

Gulfport, MS

Tampa, FL

www.phelpsdunbar.com

November 30, 2005

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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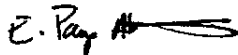
Re: Hancock Associate Assistance Foundation

Dear Sir or Madam:

Please find enclosed for filing a transmittal letter and Application by Foreign Not-For-Profit Corporation for Authorization to Conduct Affairs in Florida. Also enclosed is our check in the amount of \$78.75 for filing fee and Certificate of Status. Please return a "filed" copy to me at the address listed above.

Thank you for your assistance in this matter. If you have any questions, please do not hesitate to contact me at (662) 842-7907.

Sincerely yours,



E. Payne Atkinson

EPA/rg
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hancock Associate Assistance Foundation
(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:

E. Payne Atkinson
(Name of Person)

Phelps Dunbar, LLP
(Firm/Company)

Post Office Box 1220

(Address)

Tupelo, MS 38802-1220
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Rhonda Herring at (662) 842-7907
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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. Bancroft Associate Assistance Foundation 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. Mississippi 3. 20-3533538
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Mississippi 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 10496 Highway 49, Gulfport, Mississippi 39402
(Principal office address)

Post Office Box 4019, Gulfport, Mississippi 39402-4019
(Current mailing address)

8. Charity Disaster Relief
(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: CT Corporation System

Office Address: 1200 S. Pine Island Road

Plantation, Florida 33324
(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.

See Attached

(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.

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

A. DIRECTORS

Chairman: See attached Exhibit "A"

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

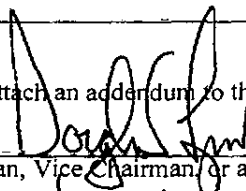
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. Douglas Sloper, President
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

ACCEPTANCE OF APPOINTMENT

RE: **Hancock Associate Assistant Foundation**

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: November 30, 2005

C T CORPORATION SYSTEM

By



Jonathan L. Miles,
Assistant Secretary

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TALLAHASSEE, FLORIDA

Exhibit "A"

Directors of Hancock Associate Assistance Foundation

D. Shane Loper	Director/President	3819 Chaumont Circle Ocean Springs, MS (228) 872-1869
Theresa Frey	Director/Vice-President	385 Nelson Road Biloxi MS 39531 (228) 388-9247
Keith A. Pires	Secretary/Treasurer Director	3514 Farrington Ct. Ocean Springs, MS (228) 818-6442
John J. Theiler	Director	12938 Coles Cove Gulfport, MS 39503 (228) 831-2869
Joy L. Phillips	Director	9164 Ashburn Lane Gulfport, MS 39503 (228) 604-4044

State of Mississippi

Office of the Secretary of State

Eric Clark, Secretary of State
Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify as follows:

That on September 26, 2005, the State of Mississippi issued a non profit charter of incorporation/certificate of authority to HANCOCK ASSOCIATE ASSISTANCE FOUNDATION.

That the registered office of said corporation is located at Cross Road's Branch, 10496 Hwy 49 (39503)
PO Box 4019, Gulfport, MS 39402 and the registered agent at that address is Loper, D. Shane.

That the period of duration is perpetual.

That insofar as the records of this office are concerned the said HANCOCK ASSOCIATE ASSISTANCE FOUNDATION is in good standing at this time.

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Given under my hand
and seal of office
October 19, 2005

Eric Clark

ERIC CLARK
Secretary of State