

706000001594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

(Business Entity Name)

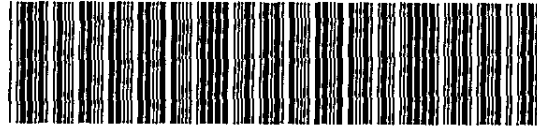
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06 MAR -9 AM 9:47

D. Brown MAR 14 2006

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Colon Cancer Alliance, Inc.
(Name of Corporation - must include suffix)

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MAR 11 1989
TALLAHASSEE
FLORIDA

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:

Amy Kelly

(Name of Person)

Colon Cancer Alliance

(Firm/Company)

5411 N. University Dr.

Suite 202

(Address)

Coral Springs, FL 33067

(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Kelly

(Name of Person)

at 954, 341-0212

(Area Code & Daytime Telephone Number)

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

STREET/COURIER ADDRESS:
New Filing 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
THE STATE OF FLORIDA:

1. Colon Cancer Alliance, 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. State of Delaware 3. 86-0947831
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/1999 5. Perpetual
(Date of Incorporation) (Duration. Year corp. will cease to exist or "perpetual")
6. 3/01/2006
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 5411 N. University Dr. Ste 202, Coral Springs, FL 33067
(Principal office address)
1440 Coral Ridge Dr. Ste 386, Coral Springs, FL 33071
(Current mailing address)
8. Non-profit patient advocacy organization
(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: Amy Kelly
- Office Address: 5411 N. University Dr, Ste 202
Coral Springs, Florida 33067
(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.

Amy Kelly
(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.

SECRET
DIVISION
06 MAR -9 AM 9:47

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

A. DIRECTORS

Chairman: Kevin Lewis
Address: 1440 Coral Ridge Dr, Ste 386
Coral Springs, FL 33071
Vice Chairman: N/A
Address: _____

Director: Amy Kelly
Address: 1440 Coral Ridge Dr, Ste 386
Coral Springs, FL 33071
Director: _____
Address: _____

B. OFFICERS

President: Jeff Brown
Address: 1440 Coral Ridge Dr, Ste 386
Coral Springs, FL 33071
Vice President: _____
Address: _____

Secretary: Sandy White
Address: 1440 Coral Ridge Dr, Ste 386 Coral Springs, FL 33071
Treasurer: Michael Zahaby
Address: 1440 Coral Ridge Dr, Ste 386 Coral Springs, FL 33071

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

13. Amy Kelly
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Amy Kelly, Director
(Typed or printed name and capacity of person signing application)

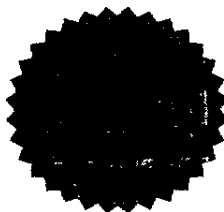
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STATE
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Delaware

The First State

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08 MAR -9 AM 9:47
FILE
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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLON CANCER ALLIANCE, INC." 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, AS OF THE FIFTEENTH DAY OF FEBRUARY, A.D. 2006.



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060138452

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4525867

DATE: 02-15-06