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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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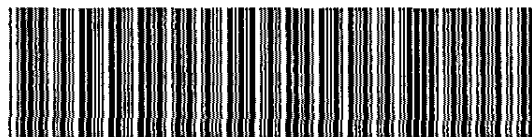
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/16/07--01031--003 **70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

V/r

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Institute for Caregiver Education, 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:

Annette Sanders
(Name of Person)

Institute for Caregiver Education, Inc.
(Firm/Company)

1995 Wayne Road

(Address)

Chambersburg, PA 17201
(City/State and Zip Code)

For further information concerning this matter, please call:

Annette Sanders at (717) 263-7766
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:

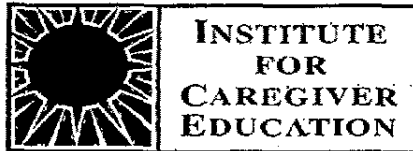
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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



Developing America's Healthcare Workforce

Department of State;

Please provide us with an Original certificate of existence for our company. This document must be authenticated by the Secretary of State in order to be accepted. We are working with a Florida entity and need this to register as a foreign not for profit conducting affairs in Florida.

Our business entity number is 2875243. We have relocated since the 2003 update, our new physical location is 1995 Wayne Road Chambersburg, Pa 17201 all other information is still accurate.

Thank You for your prompt attention to this matter.

Lisa Stiltner
Office Manager

Commonwealth of Pennsylvania
COGS - Good Standing 1 Page(s)



T0703864176

PA DEPT. OF STATE

FEB 07 2007 INSTITUTE FOR CAREGIVER EDUCATION, INC.

1995 Wayne Road, Chambersburg, PA 17201

Web Site: www.caregivereducation.org

717-263-7766 * FAX 717-263-7602



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2007

ANNETTE SANDERS
1995 WAYNE ROAD
CHAMBERSBURG, PA 17201

SUBJECT: INSTITUTE FOR CAREGIVER EDUCATIONAL INCORPORATED
Ref. Number: W07000008968

We have received your document for INSTITUTE FOR CAREGIVER EDUCATIONAL INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The entity's date of incorporation/organization must be listed in the document.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The registered agent must sign accepting the designation.

Please return the 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) 245-6962.

Valerie Herring
Document Specialist
New Filing Section

Letter Number: 907A00012838

**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. Institute for Caregiver Education, Incorporated
(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. Pennsylvania 3. 31-1656199
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Jan. 1999 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. 1995 Wayne Road Chambersburg PA 17201
(Principal office address)

1995 Wayne Road Chambersburg PA 17201
(Current mailing address)

8. Educational training
(Purpose(s) of corporation authorized in some 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: TERESA McLann

Office Address: 2110 46th Avenue West #11

Brenton Florida 34207
(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.

Teresa McLann
(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Chairman: Carol Tschop

Address: 141 Harvest Lane

Chambersburg PA 17201

Director

Vice Chairman: James Faust

Address: 3480 Turnberry Drive

Chambersburg PA 17201

Director: Susan Harley

Address: 216 B Fulton Drive

New Oxford PA 17350

Director: Jeffrey Woodyard

Address: 2232 North Second Street

Harrisburg PA 17110

B. OFFICERS

President: Annette Sanders

Address: 2302 Nafer Rd

Fayetteville PA 17222

Vice President: NA

Address:

Secretary: NA

Address:

Treasurer: NA

Address:

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

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

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

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COMMONWEALTH OF PENNSYLVANIA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE

FEBRUARY 9, 2007

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

INSTITUTE FOR CAREGIVER EDUCATION, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and
remains a subsisting corporation so far as the records of this office show, as of
the date herein.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused
the Seal of the Secretary's Office to
be affixed, the day and year above
written.

Pedro A. Cortis

Secretary of the Commonwealth