

F11000003845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

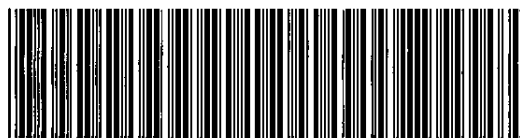
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 SEP 23 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W11-47815

K 09/26/11



RECEIVED

11 SEP 23 AM 10:14

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2011

PAUL DEBONIS
6151 LAKE OSPREY DRIVE
SUITE 342
SARASOTA, FL 34240

SUBJECT: NATIONAL CANCER ASSISTANCE FOUNDATION, INC.
Ref. Number: W11000047815

We have received your document for NATIONAL CANCER ASSISTANCE FOUNDATION, INC. 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 registered agent must sign accepting the designation.

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 the corrected 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) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 711A00021428

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: National Cancer Assistance Foundation, 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", or "Certificate of Good Standing" 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:

Paul DeBonis
Name of Person

National Cancer Assistance Foundation, Inc.
Firm/Company

6151 Lake Osprey Drive Suite 342
Address

Sarasota, FL 34240
City/State and Zip Code

pdebonis@natcaf.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul DeBonis at (386) 366-1056
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

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. National Cancer 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. Delaware 3. 26-4277380
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/12/2009 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. 6151 Lake Osprey Drive, Suite 342 Sarasota, FL 34240
(Principal office address)
- 6151 Lake Osprey Drive, Suite 342 Sarasota, FL 34240
(Current mailing address)
8. Provide financial assistance to cancer patients and families
(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)

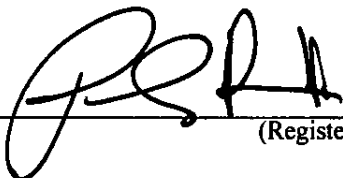
Name: Paul DeBonis

Office Address: 6151 Lake Osprey Drive Suite 342

Sarasota, Florida 34240
(City) (Zip Code)

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STATE
TALLAHASSEE, FLORIDA

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 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.

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

A. DIRECTORS

Chairman: Paul DeBonis

Address: 822 Highpoint Drive, Port Orange, FL 32127

Vice Chairman: Robert Priest

Address: 341 Routh Ave, New Smyrna Beach, FL 32168

Director: Glenn Jones

Address: 1320 Hand Ave. #26 Ormond Beach, FL 32174

Director: _____

Address: _____

B. OFFICERS

President: Paul DeBonis

Address: 822 Highpoint Drive, Port Orange, FL 32127

Vice President: _____

Address: _____

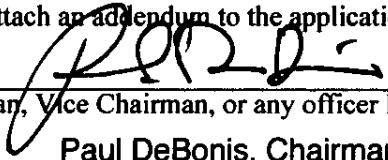
Secretary: Glenn Jones

Address: 1320 Hand Ave. #26 Ormond Beach, FL 32174

Treasurer: Robert Priest

Address: 341 Routh Ave, New Smyrna Beach, FL 32168

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. Paul DeBonis, Chairman/President
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL CANCER ASSISTANCE FOUNDATION, 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 TWENTY-SECOND DAY OF JUNE, A.D. 2011.

11 SEP 23 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8853238

DATE: 06-22-11