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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Anthony Wayne Rehabilitation Center for Handicapped and Blind, 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 Status" 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:

Angela G. Garcia

Name of Person

Carson Boxberger LLP

Firm/Company

301 W. Jefferson Boulevard

Suite 200

Address

Fort Wayne, IN 46802

City/State and Zip Code

garcia@carsonboxberger.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela G. Garcia

Name of Person

at (260) 423-9411

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

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

ANTHONY WAYNE REHABILITATION CENTER FOR HANDICAPPED AND BLIND, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on January 06, 1960, and was in existence or authorized to transact business in the State of Indiana on March 18, 2013.

I further certify this Non-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eighteenth Day of March, 2013.

Connie Lawson

Connie Lawson, Secretary of State

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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. Anthony Wayne Rehabilitation Center for Handicapped and Blind, 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. Indiana 3. 35-1049596
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/06/1960 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. 8515 Bluffton Road, Fort Wayne, IN 46809
(Principal office address)

8515 Bluffton Road, Fort Wayne, IN 46809
(Current mailing address)

8. services to disabled persons
(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 South Pine Island Road

Plantation, Florida 33324
(City) (Zip Code)

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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.*

CT Corporation System

By: James M. Halpin James M. Halpin
Assistant Secretary
(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: Kathy Bruns
Address: 8515 Bluffton Road
Fort Wayne, IN 46809

Vice Chairman: Greg Schmitt
Address: 8515 Bluffton Road
Fort Wayne, IN 46809

Director: Renee Morrison
Address: 8515 Bluffton Road
Fort Wayne, IN 46809

Director: Tom Current
Address: 8515 Bluffton Road
Fort Wayne, IN 46809

B. OFFICERS

President: Kathy Bruns
Address: 8515 Bluffton Road
Fort Wayne, IN 46809

Vice President: Greg Schmitt
Address: 8515 Bluffton Road
Fort Wayne, IN 46809

Secretary: Renee Morrison
Address: 8515 Bluffton Road, Fort Wayne, IN 46809

Treasurer: Renee Morrison
Address: 8515 Bluffton Road, Fort Wayne, IN 46809

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

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

14. Kathy Bruns, Chairman/President
(Typed or printed name and capacity of person signing application)

Additional officers and directors:

Directors

Tom Beaver, 8515 Bluffton Road, Fort Wayne, IN 46809

Sue Ehinger, 8515 Bluffton Road, Fort Wayne, IN 46809

Paula Hughes, 8515 Bluffton Road, Fort Wayne, IN 46809

Sherri Miller, 8515 Bluffton Road, Fort Wayne, IN 46809

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