

**F14000002161**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

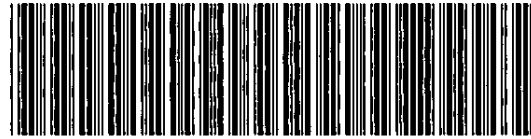
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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14 MAY 15 PM 1:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W14-27136

05/16/14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 30, 2014

ANTHONY E. NEWMAN SR.  
176 THOMAS B LANDERS RD.  
EAST FALMOUTH, MA 02536

SUBJECT: CAPE COD CAMPING CLUB, INC.  
Ref. Number: W14000027136

RECEIVED  
14 MAY 15 PM 12:17  
TALLAHASSEE, FLORIDA

We have received your document for CAPE COD CAMPING CLUB, 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) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 814A00009176

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Cape Cod Camping Club Incorporated

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Anthony E Newman Sr.

Name of Person

Cape Cod Camping Club Incorporated

Firm/Company

176 Thomas B. Landers Rd.

Address

East Falmouth, MA. 02536

City/State and Zip code

capecampresort@aol.com

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

For further information concerning this matter, please call:

Anthony E Newman Sr. at (954 ) 261 9148

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

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 CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. **Cape Cod Camping Club, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

**Cape Cod Campresort & Cabins**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Massachusetts**

(State or country under the law of which it is incorporated)

3. **06-1060514**

(FEI number, if applicable)

4. **December 09, 1981**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **June 1st. 2014**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **176 Thomas B Landers Rd. East Falmouth, MA. 02536**

(Principal office address)

**176 Thomas B Landers Rd. East Falmouth, MA. 02536**

(Current mailing address)

8. **campground & cabins reservations and sales**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Anthony E Newman Sr**

Office Address: **4240 Galt Ocean Dr. #1203**

**Fort Lauderdale**

(City)

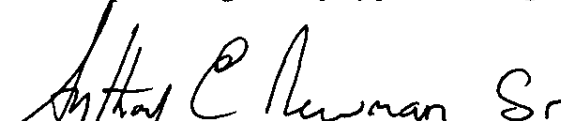
, Florida **33308**

(Zip code)

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SECRETARY OF 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 business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Anthony E Newman Sr

Address: 4240 Galt Ocean Dr. #1203  
Fort Lauderdale, FL. 33308

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Nicola G. Leonetti

Address: 95 Bunny Lane  
Brooklyn, CT.06234

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Anthony E Newman Sr.

Address: 4240 Galt Ocean Dr.  
Fort Lauderdale, FL. 33308

Vice President: Nicola G. Leonetti

Address: 95 Bunny Lane

Brooklyn, CT.06234

Secretary: Anthony E Newman Sr.

Address: 4240 Galt Ocean Dr. Fort Lauderdale, FL. 33308

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. \_\_\_\_\_

Anthony E Newman Sr.  
Signature of Director or Officer

PRESIDENT.

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Anthony E Newman Sr. President

(Typed or printed name and capacity of person signing application)

FILED  
14 MAY 15 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304



William Francis Galvin  
Secretary of the  
Commonwealth

*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

Date: April 22, 2014

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14 MAY 15 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

To Whom It May Concern :

I hereby certify that,

**CAPE COD CAMPING CLUB, INC.**

appears by the records of this office to have been incorporated under the General Laws of this

Commonwealth on **December 09, 1981.**

I also certify that so far as appears of record here, said corporation still has legal existence.



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

Certificate Number: 14047187210

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: tad