

F15000004269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

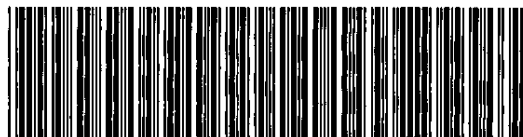
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W15-42897

Office Use Only



800276884668

09/21/15--01027--005 **70.00

FILED

2015 SEP 25 P 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 29 2015
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2015

CYNTHIA JONES-HASEK
23466 OLD MEADOWBROOK CIR
BONITA SPRINGS, FL 34134

SUBJECT: MISTY MOUNTAIN FAMILY ENRICHMENT CENTER INC.
Ref. Number: W15000062897

We have received your document for MISTY MOUNTAIN FAMILY ENRICHMENT CENTER INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 115A000198998

2015 SEP 25 P 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Misty Mountain Family Enrichment Center 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:

Cynthia Jones-Hasek

Name of Person

Misty Mountain Family Enrichment Center Inc.

Firm/Company

23466 Olde Meadowbrook Cir

Address

Bonita Springs, FL 34134

City/State and Zip Code

cindyjoneshasek@msn.com

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 SEP 25 P 2:57

FILED

For further information concerning this matter, please call:

Cynthia Jones-Hasek

Name of Person

at (503)

Area Code

702-1245

Daytime Telephone Number

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

STREET/COURIER ADDRESS:
Registration 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. Misty Mountain Family Enrichment Center 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.)

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

2. Washington 3. 93-1328248
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/03/2001 5. _____
(Date of Incorporation) (Date of duration, if other than 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. 23466 Olde Meadowbrook Cir., Bonita Springs, FL 34134
(Principal office address)

(Current mailing address, if different)

8. to strengthen marriages and families through counseling and relationship education
(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: Cynthia Jones-Hasek

Office Address: 23466 Olde Meadowbrook Cir.

Bonita Springs, Florida 34134
(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.*


(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.

FILED
2015 SEP 25 P 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Gregory Hasek

Address: 23466 Olde Meadowbrook Cir.

Bonita Springs, FL 34134

Vice President: Dennis Davis

Address: 1881 Shasta Dr

Lancaster, OH 43130

Secretary: Cynthia Jones-Hasek

Address: 23466 Olde Meadowbrook Cir., Bonita Springs, FL 34134

Treasurer: _____

Address: _____

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

13. Cynthia Jones-Hasek
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Cynthia Jones-Hasek, Secretary
(Typed or printed name and capacity of person signing application)

FILED
2015 SEP 25 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Addendum to Application by Foreign Not for Profit Corporation for
Authorization to Conduct its Affairs in Florida, for Misty Mountain
Family Enrichment Center Inc.

Additional Officers:

John Jones
507 Ridge Ave.
Liberty, NC 27298

Richard Wendlandt
15495 Tuolumne Rd.
Sonora, CA 95370

FILED

2015 SEP 25 P 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
MISTY MOUNTAIN FAMILY ENRICHMENT CENTER

I FURTHER CERTIFY that the records on file in this office show that the above named Non-Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 10/3/2001.

I FURTHER CERTIFY that as of the date of this certificate, MISTY MOUNTAIN FAMILY ENRICHMENT CENTER remains active and has complied with the filing requirements of this office.

Date: September 14, 2015

UBI: 602-152-952



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State