

# F16000000102

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax and number (shown below) on the top and bottom of all pages of the document.

((H16000003753 3)))



H160000037533ABCZ

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**\*RE-SUBMIT\***

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

Please retain original filing  
date of submission 1/6

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**ACTS Legacy Foundation, Inc.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 0607    |
| Estimated Charge      | \$70.00 |

\*\* Attn: Justin  
Shivers\*\*

Electronic Filing Menu

Corporate Filing Menu

Help

1/7/2016 2:34:54 PM From: To: 8506176383( 2/7 )  
850-617-6381 1/7/2016 9:16:23 AM PAGE 1/001 Fax Server



January 7, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT

SUBJECT: ACTS LEGACY FOUNDATION, INC  
REF: W16000000797

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

The principal place of business can not contain a po box.,

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) 245-6051.

Justin M Shivers  
Regulatory Specialist III  
Registration/Qualification Section

FAX Aud. #: H16000003753  
Letter Number: 116A00000354

**\*RE-SUBMIT\***  
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P.O BOX 6327 - Tallahassee, Florida 32314

1/7/2016 2:34:54 PM From: To: 8506176383( 3/7 )

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ACTS Legacy 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 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:

Jacqueline Brooks, Esq.

Name of Person

Saul Ewing, LLP

Firm/Company

500 E. Pratt Street, 9th Floor

Address

Baltimore, MD 21202

City/State and Zip Code

jbrooks@soul.com

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

For further information concerning this matter, please call:

M'Linda Draughn

Name of Person

at (

410

Area Code

332-8859

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. ACTS Legacy 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.)

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

2. Delaware

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

3.

(FEI number, if applicable)

4. 10/31/2000

(Date of Incorporation)

5.

(Date of duration, if other than perpetual)

6. N/A

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 375 Morris Road, P.O. Box 90, West Point, PA 19486

(Principal office address)

(Current mailing address, if different)

8. Non-profit, Charitable and philanthropic non-profit focused on retirement

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) and aging communities and populations

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

Name: Corporation Service Company

Office Address: 1201 Nays Street

Tallahassee


(City)

, Florida 32301

(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)

Linda Snook  
Assistant VP

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.

1/7/2016 2:34:54 PM From: To: 8506176383( 5/7 )

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: SEE ATTACHED

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: SEE ATTACHED

Address:

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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

13.

Kenneth Christensen  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Karen Christensen, Treasurer  
(Typed or printed name and capacity of person signing application)

RECEIVED  
16 JAN - 6 AM 11:11  
TALLAHASSEE, FLORIDA

1/7/2016 2:34:54 PM From: To: 8506176383( 6/7 )

#### OFFICERS

Marvin Mashner, Chairperson  
Edward Steiner, Vice-Chairperson  
J. Mark Vanderbeck, Secretary  
Karen I. Christiansen, Treasurer  
Richard Winter Assistant, Treasurer  
Raymond Boyle Assistant, Secretary

#### BOARD MEMBERS

1. Bayard W. Allmond, III, Esq.
2. Karen Christiansen
3. Thomas Clemens
4. H. Bruce Detweiler, CPA
5. Robert Evans
6. Elric C. Gerner
7. Gerald Grant
8. Rev. George R. Gunn, Jr.
9. Jane Hukill
10. Louise H. Jones
11. Marvin Mashner
12. Deidre McCartney, Esq.
13. Merrill S. Moyer
14. W. Hank Stack
15. Mark Vanderbeck
16. Nina Worthington
17. Thomas Young

Address for all: 375 Morris Rd.  
P.O. Box 90  
West Point, PA 19486

FILED  
16 JAN -6 AM 11:11  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ACTS LEGACY 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 FOURTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



3310085 8300C

SR# 20160013642

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 201604541

Date: 01-04-16