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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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FILED FILED



April 6, 2016

CHARLOTTE J EASTLACK 1803 EAST WILLOW GROVE AVENUE GLENSIDE, PA 19038

SUBJECT: THE CHRISTIAN COUNSELING AND EDUCATIONAL

**FOUNDATION** 

Ref. Number: W16000025354

We have received your document for THE CHRISTIAN COUNSELING AND EDUCATIONAL FOUNDATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 816A00006997

### • COVER LETTER

**TO:** Registration Section Division of Corporations

SUBJECT Christian Counseling & Educational Foundation, Name of Corporation - must include suffix Inc
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:
Charlotte J Eastlack Name of Person
Christian Counseling & Educational Foundation
1803 East Willow Grove Avenue.
Glenside PA 19038 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Charlotte Eastlack at (215) 690-9161 Name of Person Area Code 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 Certificate of Status  \$70.00 Filing Fee Certificate of Status

### 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:
(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.)
in the name at present. Company or Co. may not be used as a corporate surfix by a nonprofit corporation.)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. New Jersey 3. 23-1996251 (State or country under the law of which it is incorporated) (FEI number, if applicable)
1. 02/24/1968 5. <u>Derrot ual</u> (Date of Incorporation) (Date of duration, if other than perpetual)
5. O3-21-2016 (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
1. 1803 E Willow Grove Ave Glenside, PA 19038 (Principal office address)
(Current mailing address, if different)
CCEF exists to restore Christ to counseling and counseling to the
(Purpose(s) of cardoration authorized in home state or downtry to be carried out in the state of Florida) and with ting.  does this through teaching, speaking, counseling, and with ting.
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: NRAI Services, Inc.
Office Address: 1200 South Pine Island Road
Plantation Florida 33324 (Zip Code)
(City)
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 lesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I wrther agree to comply with the provisions of all statutes relative to the proper and complete performance of my
uties, and I am familiar with and accept the obligations of my position as registered agent.
Oppidan Vincant Jenifer Vincent, VP and Asst Sec
Januar Jenifer Vincent, VP and Asst Sec (Registered agent's signature)
1. 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

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A.	DI	Кŀ	C.	ΙU	KS

Chairman: Dr. David T. Harvey	
Address: 4500 Shannon Lakes West 12	***
Tallahassee, F-L 32309	
Vice Chairman: hone	
Address:	
Director: None	
Address:	
	·
Director: none	<del></del>
Address:	
B. OFFICERS	APR
President: Dr. David Powlison, Executive Director	
Address: 341 W. Woverly Rd.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Glenside, PA 19038	, M.A.
Vice President: MS. Rebecca Eaton	
Address: 4250 Orange mans Rd.	
Hatboro, PA 19040	
Secretary: Dr. Richard M. Horne	<del></del>
Address: 200 E Park Way Ave, Chester, PA	19013
Treasurer: Mr. David W Budnick	<del></del>
Address: 200 Regency Drive, North Wales, PA	19454
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	ınd/or directors.
13. lebloca Exton	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app 14. Rebecca Eaton, officer	ncation)
(Typed or printed name and capacity of person signing application)	

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

03/08/2016

### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

### THE CHRISTIAN COUNSELING AND EDUCATIONAL FOUNDATION

is duly registered to do business under the laws of the Commonwealth of Pennsylvania and remains a registered Foreign Non-Profit (Non Stock) so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Certificate of Registration shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth



Certification Number: TSC160308110780-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx