

12/20/2019

Division of Corporations

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## FOREIGN PROFIT/NONPROFIT CORPORATION

**Byron Robinson Educational Foundation, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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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. Byron Robinson Educational 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. Massachusetts 3. 04-3119780  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 6, 1991 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

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

7. 3943 Rock Hill Loop, Apopka, FL 32712  
(Principal office street address)

(Current mailing address, if different)

8. See attachment  
(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)

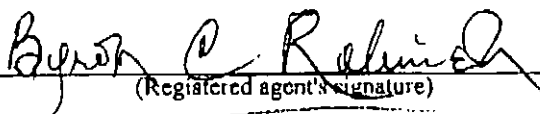
Name: Byron C. Robinson

Office Address: 3943 Rock Hill Loop

Apopka, Florida 32712  
(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.

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☒ Chairman Name: Byron C. Robinson  
☐ Vice Chairman Address: 3943 Rock Hill Loop  
☒ Director Apopka, FL 32712  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Mark A. Robinson  
☐ Vice Chairman Address: 1226 Spring Creek Dr.  
☒ Director Nashville, TN 02186  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Dorothea E. Robinson  
☐ Vice Chairman Address: 3943 Rock Hill Loop  
☒ Director Apopka, FL 32712  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Clé Clé  
☐ Vice Chairman Address: 1642 E. 56th St.  
☒ Director Chicago, IL 60637  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

**NOTE: Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Byron C. Robinson  
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Byron C. Robinson, Chairman  
 (Typed or printed name and capacity of person signing application)

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**Attachment to  
Statement of Qualification**

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

To engage in charitable, educational, religious and scientific purposes; to promote the education of men, women and children; and in connection therewith, to stimulate, encourage and support cultural and educational activity; and, including without limiting the generality, to assist in the construction of educational, religious and scientific facilities in the New England States, and, other states of the United States and other countries.

To do everything and anything reasonable and lawfully necessary, proper, convenient or suitable for the achievement of the purposes above stated, or, for any of them, or, for the furtherance of the said purposes.

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William Francis Galvin  
Secretary of the  
Commonwealth

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

Date: December 19, 2019

To Whom It May Concern :

I hereby certify that according to the records of this office,  
**BYRON ROBINSON EDUCATIONAL FOUNDATION, INC.**

is a domestic corporation organized on **May 06, 1991**

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 180 section 26 A, for revocation of the charter of said corporation; that the State Secretary has not received notice of dissolution of the corporation pursuant to Massachusetts General Laws, Chapter 180, Section 11, 11A, or 11B; that said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



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: 19120514710

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

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