

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. Potter's Hands Childrens Center NonProfit Corporation
(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. Arkansas 3. 27-4186361
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. December 13, 2010 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. Dec. 30, 2019
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 353 N W Sheffield Circle, Port Saint Lucie, FL. 34983
(Principal office street address)

(Current mailing address, if different)

8. Raise funds to support an orphanage in Pilate, Haiti
(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: Larry D. Maschhoff
Office Address: 105 Bellamy Trail
Sebastian, Florida 32958
(City) (Zip Code)

FILED
2020 JAN -2 P 11:12
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. 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: Suze Dambreville Francois
 Vice Chairman Address: 353 N W Sheffield Circle
 Director Port Saint Lucie, FL. 34983
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Rose Vital
 Vice Chairman Address: 353 N W Sheffield Circle
 Director Port Saint Lucie, FL. 34983
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

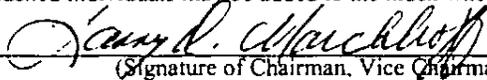
Chairman Name: Larry D. Maschhoff
 Vice Chairman Address: 105 Bellamy Trail
 Director Sebastian, FL. 32958
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Julie Maschhoff
 Vice Chairman Address: 105 Bellamy Trail
 Director Sebastian, FL. 32958
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Glenda Curits
 Vice Chairman Address: 2103 Lee. St.
 Director Fayetteville, Ar. 72701
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Ryan Maschhoff
 Vice Chairman Address: 9020 106 Ave.
 Director Vero Beach, FL. 32967
 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. 
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Larry D. Maschhoff, Treasurer
 (Typed or printed name and capacity of person signing application)

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: Terry Slemmer
 Vice Chairman Address: 7 Broad St.
 Director Stockton, NJ. 08559
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

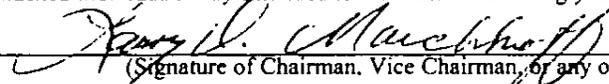
Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 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. 
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Larry D. Maschhoff, Treasurer
 (Typed or printed name and capacity of person signing application)



**Arkansas Secretary of State
John Thurston**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

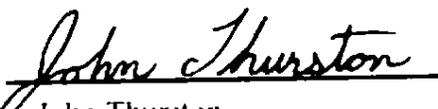
POTTER'S HANDS CHILDREN CENTER

authorized to transact business in the State of Arkansas as a Non-Profit Corporation, filed Articles of Incorporation in this office December 13, 2010.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.

In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 28th day of December 2019.




John Thurston
Secretary of State
Online Certificate Authorization Code: 204750354eac154
To verify the Authorization Code, visit sos.arkansas.gov



Search Incorporations, Cooperatives, Banks and Insurance Companies

Printer Friendly Version

LLC Member information is now confidential per Act 865 of 2007

Use your browser's back button to return to the Search Results

[Begin New Search](#)

For service of process contact the [Secretary of State's office](#).

Corporation Name	POTTER'S HANDS CHILDREN CENTER
Fictitious Names	
Filing #	800190175
Filing Type	Nonprofit Corporation
Filed under Act	Dom Nonprofit Corp; 1147 of 1993
Status	Good Standing
Principal Address	3109 STONE WAY BENTONVILLE, AR 72712
Reg. Agent	SUZE DAMBREVILLE FRANCOIS
Agent Address	3109 STONE WAY BENTONVILLE, AR 72712
Date Filed	12/13/2010
Officers	SUZE DAMBREVILLE FRANCOIS , Incorporator/Organizer SUZE DAMBREVILLE-FRANCOIS , President GLENDA CURTIS , Secretary ROSE VITAL , Vice-President TERRY SLEMMER , Director LARRY MASCHHOFF , Treasurer ROSE VITAL , Director SUZE FRANCOIS , Director GLENDA CURTIS , Director JULIE MASCHHOFF , Director RYAN MASCHHOFF , Director RYAN MASCHHOFF , Director THOMAS LAFLEUR , Incorporator/Organizer
Foreign Name	N/A
Foreign Address	
State of Origin	AR

[Purchase a Certificate of Good Standing for this Entity](#)

[Submit a Nonprofit Annual Report](#)

[Change this Corporation's Address](#)