

F20000000695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

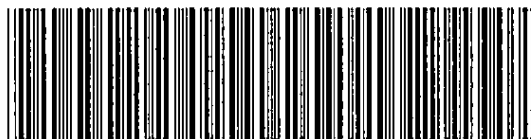
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600339550426

01/20/20--01017--122 4470...

FILED  
2020 JAN 27 PM 11:38  
TALLAHASSEE, FLORIDA

FEB 10 2021  
T. LEBRIEUX

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Nantucket Comedy Festival, 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:

Alyssa Corry  
Name of Person

Nantucket Comedy Festival, Inc.  
Firm/Company

PO Box 2336

Address

Nantucket, MA 02584  
City/State and Zip Code

alyssakate01@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alyssa Corry at ( 413 ) 531-3115  
Name of Person Area Code Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$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. Nantucket Comedy Festival, 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. 26-2303910
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 2, 2008 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. 48 Hoper Farm Rd, Nantucket, MA 02554
(Principal office street address)

PO Box 2336, Nantucket, MA 02584
(Current mailing address, if different)

8. fundraising for non-profit activities
(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: Registered Agents, Inc.

Office Address: 7901 4th St N, Suite 300

St Petersburg, Florida 33702
(City) (Zip Code)

FILED
2020 JAN 27 P 11:38
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.

Bill Hume

(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: Kevin Flynn  
 Vice Chairman Address: 44 Race Hill Road  
 Director Madison, CT  
 President 06443  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: John Burkey  
 Vice Chairman Address: \_\_\_\_\_  
 Director 20 Macomet Ave.  
 President Nantucket, MA  
 Vice President 02554  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

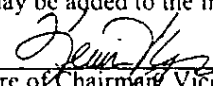
Chairman Name: Tim Braine  
 Vice Chairman Address: \_\_\_\_\_  
 Director 771 West End Ave, #4B  
 President New York, NY  
 Vice President 10025  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: Franklin Levy  
 Vice Chairman Address: \_\_\_\_\_  
 Director 8328 Wiloughby Ave  
 President West Hollywood, CA  
 Vice President 90069  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

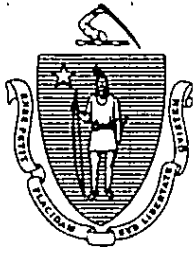
Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_

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. Kevin Flynn, Executive Director  
(Typed or printed name and capacity of person signing application)



William Francis Galvin  
Secretary of the  
Commonwealth

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

Date: January 06, 2020

To Whom It May Concern :

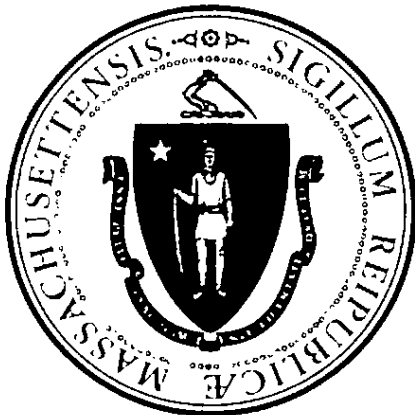
I hereby certify that

**NANTUCKET COMEDY FESTIVAL, INC.**

appears by the records of this office to have been incorporated under the General Laws of this

Commonwealth on **April 02, 2008** (Chapter 180).

I also certify that so far as appears of record here, said corporation still has legal existence.



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

A handwritten signature in cursive script that reads "William Francis Galvin".

Secretary of the Commonwealth

Certificate Number: 20010089930

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

Processed by: