

F23000006509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

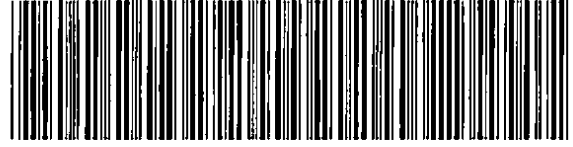
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. B. ...

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lake Kanasatka Watershed Association, 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:

Colette Cooke

Name of Person

Lake Kanasatka Watershed Association, Inc.

Firm/Company

P. O. Box 774

Address

Center Harbor, NH 03226

City/State and Zip Code

Lkwamail@gmail.com

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

For further information concerning this matter, please call:

Colette Cooke

at (978) 505-1203
Area Code Davin

Name of Person

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. Lake Kanasatka Watershed Association, 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. New Hampshire

3. 85-3296994

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

(FEI number, if applicable)

4. 01/03/78

5. perpetual

(Date of Incorporation)

(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. 62 Vonnurth Rd., Moultonborough, NH 03254

(Principal office street address)

P.O. Box 774, Center Harbor, NH 03226

(Current mailing address, if different)

8. Nonprofit environmental fundraising through website, email

(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 STE 300

St. Petersburg

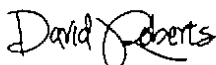
(City)

, Florida 33702

(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.

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: Kirk Meloney
☐ Vice Chairman Address: _____
☐ Director 291 College Rd
☒ President Center Harbor, NH 03226
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Colette Cooke
☐ Vice Chairman Address: _____
☐ Director 62 Vonhurst Rd.
☐ President Moultonborough, NH 03254
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Timothy Baker
☐ Vice Chairman Address: _____
☒ Director 4 Buckskin Ln
☐ President Westford, MA 01886
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Jane Nash
☐ Vice Chairman Address: _____
☐ Director 83 Coe Point Rd
☐ President Moultonborough, NH 03254
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Eileen Ehman
☐ Vice Chairman Address: _____
☐ Director 4 Jacks Rd.
☐ President Moultonborough, NH 03254
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Scott Apgar
☐ Vice Chairman Address: _____
☒ Director 40 Glidden Rd
☐ President Moultonborough, NH 03254
☐ 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. M Colette Cooke
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Mary Colette Cooke, Corporate Secretary and Director
(Typed or printed name and capacity of person signing application)

Attached sheet - additional Directors

State of New Hampshire

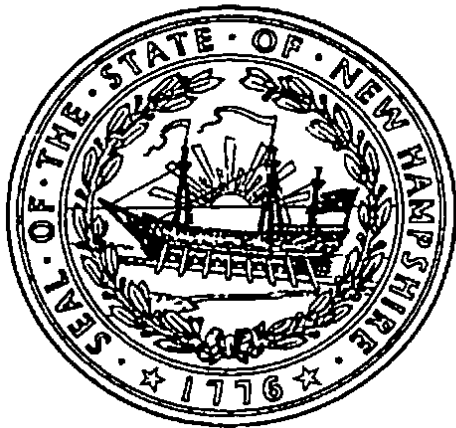
Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that LAKE KANASATKA WATERSHED ASSOCIATION, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on January 03, 1978. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 64091

Certificate Number : 0006338577



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 25th day of October A.D. 2023.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan
Secretary of State