

N020000009510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

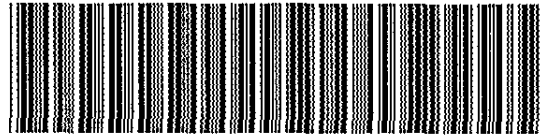
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 DEC -9 AM 11:23

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## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: FMBC Ministries of Seffner, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Larry D. Lewis  
Name (Printed or typed)

6720 C.R. 579 North

Address

Seffner, FL 33584

City, State & Zip

(813) 626-9080

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

FMBCMinistries of Seffner, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

6720 C.R. 579 North  
Seffner, FL 33584

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide social, economic , and educational opportunities to the community of Seffner and its environs.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Formation of community members to form a founding coalition to establish a board of directors to govern the affairs of the corporation.

**ARTICLE V INITIAL DIRECTORS/OFFICERS**

The name(s), address(es) and title(s):

Larry D. Lewis, President  
James D. Robinson, Vice President  
English Bradshaw, Secretary  
Sharon L. Jackson, Treasurer

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the registered agent is:

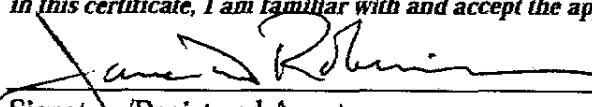
James D. Robinson  
145 Butler Rd  
Brandon, FL 33511

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Larry D. Lewis  
6720 C.R. 579 North  
Seffner, FL 33584

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

  
\_\_\_\_\_  
Signature/Registered Agent

12/5/02  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/05/02  
\_\_\_\_\_  
Date

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA