

N0300000 1186

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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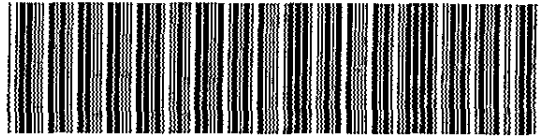
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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gk/12

## TRANSMITTAL LETTER

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

SUBJECT: GAUCARR FOUNDATION INCORPORATED  
(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: EULIE V. WESTCARR  
Name (Printed or typed)

2920 CONSON PLACE  
Address

LAKE WORTH FL. 33463  
City, State & Zip

561-641-5609  
Daytime Telephone number

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

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

GAUCARR FOUNDATION INCORPORATED

## ARTICLE II PRINCIPAL OFFICE

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

5920 CORSON PLACE  
LAKE WORTH FLA. 33463.

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ASSIST THE CHILDREN IN JAMAICA WHO ARE INFECTED WITH OR AFFECTED BY THE AIDS VIRUS. PROVIDING THEM WITH BOOKS, CLOTHING TOYS ETC AND TO ASSIST IN PAYING SCHOOL FEES, MEDICATIONS & PLACEMENT IN FOSTER HOMES.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

DIRECTORS ARE APPOINTED BASED ON THEIR INTEREST AND ENTHUSIASM TO HELP. THEY AGREE TO SERVE THE CORPORATION FOR AT LEAST ONE YEAR.

## ARTICLE V INITIAL DIRECTORS/OFFICERS

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

EULIE WESTCARR; 5920 CORSON PLACE; LAKE WORTH; FL 33463 ⇒ DIRECTOR  
GENEVA EDMAN; 1212 ALHAMBRA WAY; ST. PETE. FL 33705 ⇒ CHAIR PERSON  
ARLENE WESTCARR; 5920 CORSON PLACE; LAKE WORTH FL. 33463 ⇒ PROGRAMMER/COORDINATOR.

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

EULIE WESTCARR  
5920 CORSON PLACE  
LAKE WORTH; FL. 33463.

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ARLENE WESTCARR  
5920 CORSON PLACE  
LAKE WORTH FL. 33463

\*\*\*\*\*  
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.

Eulie Westcarr  
Signature/Registered Agent

2-3-03  
Date

Arleen Westcarr  
Signature/Incorporator

2-3-03  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA