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Ray Plummer GAVE

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CORRECT ART

DATE 4/10/03

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600015549006

03 APR 10 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

YCS
4/11/03

TRANSMITTAL LETTER

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

SUBJECT: Primary Care Medical Services of Kissimmee Valley, 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: Ray Plummer and Mary Ann Barry
Name (Printed or typed)

1875 Boggy Creek Road
Address

Kissimmee FL 34744
City, State & Zip

(407) 343 - 2020
Daytime Telephone number

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

STATE OF FLORIDA		VOUCHER SCHEDULE		DATE	04/09/2003	S-W/Agency Voucher No.
OLO	640000	JT-2				D30-0053-940
DEPARTMENT	OSCEOLA COUNTY HEALTH DEPARTMENT					000422
SITE	OSCEOLA CHD - VALARIE MOORE					

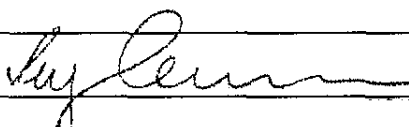
CFO ACCOUNT NUMBER	CF	OBJECT CODE	TRANS CODE	TRANS CODE
	CFO ACCOUNT NAME		25	45
	INVOICE		INCREASE AMOUNT	INCREASE AMOUNT
64202141001-6420070049-04000000	COUNTY HEALTH DEPARTMENT TRUST EXPENSES	4990	87.50	
	INV: OSCHD			
	87.50			
45502130001-4530010000-00010000	CORPORATIONS TRUST FUND DOS FEE S			87.
TRANSACTION TYPE: JOURNAL ADVICE			TOTAL	TOTAL
			87.50	87

I hereby certify that the above transactions are in accordance with the Florida Statutes and all applicable laws and rules of the State of Florida.

For State Comptroller's Use Only

Time In

APPROVED:



TITLE ADMINISTRATOR

Audited By

FILED
03 APR 10 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
PRIMARY CARE MEDICAL SERVICES OF POINCIANA, INC.

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

ARTICLE I NAME

The name of the corporation shall be: Primary Care Medical Services of Poinciana, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
1875 Boggy Creek Road Kissimmee Fl 34744

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To ensure that medically underserved and eligible persons in the Poinciana community and Osceola County have access to comprehensive primary health care services.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
Election of Board members will be held one month prior to the annual meeting of the Board, by a majority vote of the existing Board members. Notice of annual meeting shall be served no later than 15 days prior to the annual meeting. The individuals elected shall hold office for a three (3) year term. In selecting its members, the Board will use the criteria set out in the By-Laws of the corporation. Vacancies of the Board whether caused by resignation, death, or otherwise may be filled by a majority vote of the remaining members attending a regular meeting or a special meeting called for that purpose. A Board member thus elected to fill any vacancies shall hold office for the unexpired term of his predecessor, and until his successor is elected and qualified.

ARTICLE V INITIAL DIRECTORS/OFFICERS

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

The initial number of directors shall be 11 members. The Board shall consist of not less than 9 members nor more than 15 members. The directors shall be elected as provided in the By-Laws of the corporation. The names and addresses of the initial members of the Board of Directors, who shall hold office in accordance with the provisions of the By-Laws of the Corporation, are:

<u>Name</u>	<u>Address</u>	<u>Title</u>
Mary Ann Barry	614 Koala Court Kissimmee Fl 34759	Chairperson
Bernadette Brauer	240 Churchill Court Kissimmee Fl 34758	Vice-chairperson
David Katan	316 Ferrara Court Kissimmee Fl 34758	Treasurer

Keith Noad	1902 Island Circle #202 Kissimmee FI 34741	Director
Arnim Watson	707 Toltec Pl. Kissimmee 34758	Director
Wilda Belisle	856 E. Flag Lane Kissimmee, FL 34759	Director
Iraida Matos	109 Dorchester Ct. Kissimmee 34758	Director
Robert Dent	2700 Scrub Jay Trail Kissimmee, FI 34759	Director
Jim Shanks	206 Park Place Blvd. Kissimmee FI 34741	Director
Blaine Muse	215 East Lakeshore Blvd Kissimmee, FI 34744	Director
Vicki Kilroy	1350 Lakeview Ave. Kissimmee 34744	Director

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mary Ann Barry 614 Koala Court
Kissimmee FI 34759

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mary Ann Barry 614 Koala Court
Kissimmee FI 34759

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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.

Mary Ann Barry
Signature/Registered Agent—Mary Ann Barry

4/8/03
Date

Mary Ann Barry
Signature/Incorporator—Mary Ann Barry

4/8/03
Date