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2003 APR 21 PM 2:26  
CLERK OF STATE  
TALLAHASSEE FLORIDA

4/23/03

TRANSMITTAL LETTER

FILED

2003 APR 21 PM 2: 26

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: OSCEOLA COUNTY ABSTINENCE PROJECT, 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	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** PHYLLIS BOHO

Name (Printed or typed)

27 EAST 13<sup>TH</sup> STREET

Address

St. Cloud, FL 34769

City, State & Zip

(407) 892-6012

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)

**FILED**

2003 APR 21 PM 2: 26

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

**OSCEOLA COUNTY ABSTINENCE PROJECT, INC.**

**ARTICLE II PRINCIPAL OFFICE**

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

27 EAST 13<sup>TH</sup> STREET  
ST. CLOUD, FL 34769

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide County wide Abstinence Education to teens & pre-teens, as well as safe and healthy after-school programming where teens can learn the value of postponing sexual involvement until marriage.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The Board Of Directors will be appointed by their predecessors.

**ARTICLE V INITIAL DIRECTORS/OFFICERS**

The name and addresses.

Sandi Miller, 27 East 13<sup>th</sup> Street, St. Cloud, FL 34769  
Dr. Tony Buchanan, 1011 Bill Beck Blvd., Kissimmee, FL 34744  
Joel Henderson, 3163 N. Orange Blossom Trail, Kissimmee, FL 34744  
Patty McWhirter, 1050 Grape Ave., St. Cloud, FL 34769  
Linda Clarke, 5900 E. Irlo Bronson Hwy., St. Cloud, FL 34744

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

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

SANDI MILLER  
27 EAST 13<sup>TH</sup> STREET  
ST. CLOUD, FL 34769

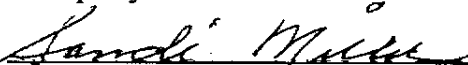
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

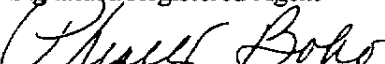
PHYLLIS BOHO  
27 EAST 13<sup>TH</sup> STREET  
ST. CLOUD, FL 34769

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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.*

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

4/15/03  
\_\_\_\_\_  
Date

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

4/15/03  
\_\_\_\_\_  
Date