

NO3000005694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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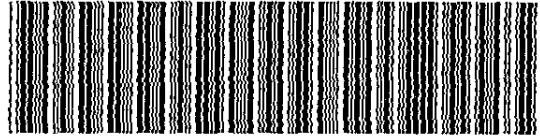
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/16/03--D1029--009 **78.75

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03 JUL -3 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W03-17521

Bm 7/7

TRANSMITTAL LETTER

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

SUBJECT: LANDINGS CHORALE 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: MARIA APONTE
Name (Printed or typed)

4503 WINDJAMMER LN
Address

FT MYERS FL 33919
City, State & Zip

239-466-7405
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 18, 2003

MARIA APONTE
4503 WINDJAMMER LN
FT MYERS, FL 33919

SUBJECT: LANDINGS CHORALE INC.
Ref. Number: W03000017521

We have received your document for LANDINGS CHORALE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal office and/or a mailing address in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist
New Filings Section

Letter Number: 903A00037598

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

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

LANDINGS CHORALE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business shall be:

LANDINGS
4420 FLAGSHIP DRIVE
FORT MYERS FL 33919
STATE OF FLORIDA

The mailing address of the corporation shall be:

4503 WINDJAMMER LN
FORT MYERS FL 33919

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE LEARNING, PARTICIPATION AND ENJOYMENT FOR LANDINGS AND RIVERSIDE AREA RESIDENTS. TO RAISE FUNDS FOR AREA YOUTH FOR MUSICAL TRAINING. TO PROVIDE ENTERTAINMENT FOR NURSING HOMES, HOSPITALS, AND SENIOR HOMES.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

THE LANDINGS CHORALE MEMBERSHIP WILL VOTE FOR THE BOARD MEMBERS. A

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TALLAHASSEE, FLORIDA

SIMPLE MAJORITY OF THE LANDINGS CHORALE MEMBERSHIP SHALL ELECT THE BOARD MEMBERS. THE BOARD SHALL VOTE ON IT'S OFFICERS.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The names, addresses and titles of the officers are:

PRESIDENT
HOWARD WRIGHT
4815 S LANDINGS DR #202
FT MYERS FL 33919

VICE PRESIDENT
TOM AMMER
4595 SO LANDINGS DR
FT MYERS FL 33919

SECRETARY
SHARON MORSE
4240 STEAMBOAT BLVD
FT MYERS FL 33919

TREASURER
MARIA APONTE
4503 WINDJAMMER LN
FT MYERS FL 33919

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the registered agent is:

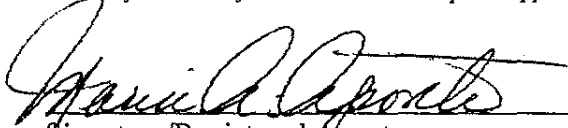
MARIA APONTE
4503 WINDJAMMER LN
FT MYERS FL 33919

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIA APONTE
4503 WINDJAMMER LN
FT MYERS FL 33919

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

6/30/03
Date



Signature, Incorporator

6/30/03
Date

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03 JUL -3 AM 9:57
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TALLAHASSEE, FLORIDA