N03000008836

(Re	equestor's Name)	
(Art	dress)	
('''	, u ,uco,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e#)
PICK-UP	■ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
(50	ourion ivanion,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
*		
	V	\/\
	Office Use On	
		" In
()	/ \	1 W
	1	



600023209136

09/22/03--01034--002 **157.50

03 DCT 10 PH 2: 54

SECRETARY OF STATE
TALLANGESTE, FLORIDA

TRANSMITTAL LETTER

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

subject: <u>The</u>	(PROPOSE CORPORA	amily Rese	ource Center DE SUFFIX)
Enclosed is an original a \$70.00 Filing Fee	\$78.75 Filing Fee &	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee,
	Certificate of Status	& Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED	

FROM: Jenn, fer Harris
Name (Printed or typed)

9605 Carbondake Dr. E.
Address

Jacksonville Florida 32208

City, State & Zip

Dayting Telephone number

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 29, 2003

JENNIFER HARRIS 9605 CARBONDALE DR. E. JACKSONVILLE, FL 32208

SUBJECT: THE VILLAGE FAMILY RESOURCE CENTER

Ref. Number: W03000027582

We have received your document for THE VILLAGE FAMILY RESOURCE CENTER. However, the document has not been filed and is being returned for the following:

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The document must have original signatures.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent listed is not an active entity according to our records.. Please list an individual or another entity that is active with this office.

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) 245-6934.

Loria Poole Document Specialist New Filings Section

Letter Number: 803A00052891

Hoste & Corrections were not Averas any, Registered agent is on colvernity whe State ab Thuisa. Registered Agent Doc. # 61008900139

Articles of Non-Profit Incorporation of The Village Family Resource Center, Inc.

1. Article I Name of Corporation

The name of the Non-Profit Corporation is The Village Family Resource Center, Inc.

2. Article II Principal Place of Business

The principal place of business is located at 9034 Second Ave., Jacksonville, Fl. 32208

3. Article III Purpose

The nature of the business or purposes to be conducted or promoted is to provide counseling on housing, job referral, and family counseling for low-income families. In addition, these services will include after school educational programs at the levels of K-9.

4. Article IV Election of Officers

The Board of Directors are appointed through a selection process based on education, experience with family counseling and background information.

5. Article V Name of Officers

Jennifer Harris, President Joy Alexander, Secretary Jacquelin Edmond, Treasury

6. Article VI Principle Office of Registered Agent

Its registered office in the State of Florida is 9951 Atlantic Blvd., Suite 317-1, in the City of Jacksonville, Florida 32225, County of Duval. The name of its registered agent at such address is Dinahsty's

7. Article VII.

Jennifer Ann Harris, 9605 Carbondale Drive East, Jacksonville, Florida 32208

I, THE UNDERSIGNED, the incorporator hereinbefore named, for the purpose of forming a corporation pursuant to the General Corporation Law of the State of Florida, do make this Articles of Non-Profit Incorporation, hereby declaring and certifying that this is my act and deed and the facts herein stated are true, and accordingly have hereunto set my hand this 18th day of September 2003.

Incorporator /Jennifer Harris

Registered Agent/ Dinahsty's (Dinah L. Mason)

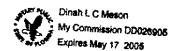
State of House) so

BE IT REMEMBERED that on this 18 Land personally came before me, a Notary Public for the State of 19 Jennifer Harris, to me personally known to be the same person who executed the foregoing Articles of Non-Profit Incorporation, and acknowledged that said person signed as the person's free act and deed the foregoing document and declared that the statements therein contained are true to the person's best knowledge and belief.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year above written.

Notary Public

My commission expires: 5/17/2005



TALLAPASSEE, FLORIDA

03 OCT 10 PM 2: E1