

NO3000010378

(Requestor's Name)

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(Address)

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☐ PICK-UP

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(Business Entity Name)

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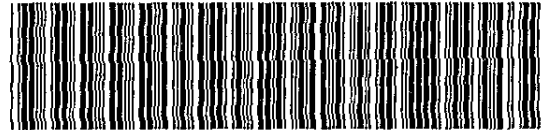
Patricia GAVE

AUTHORIZATION BY PHONE TO

CORRECT Aut. IN

DATE 12-2-03

DOC. EXAM ✓



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11/19/03--01030--009 **87.50

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03 NOV 19 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-2-03

TRANSMITTAL LETTER

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

SUBJECT: Bethlehem Christian Academy, 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: Patricia Coleman
Name (Printed or typed)

10444 Skycrest Dr
Address

Jacksonville, FL 32246
City, State & Zip

904-241-7242
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of this corporation shall be Bethlehem Christian Academy, Inc.

ARTICLE II PRINCIPAL OFFICE

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

P. O. Box 50714

1423 N. 8th Ave.

Jacksonville Beach, FL 32250

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide private education for students grades Kindergarten through twelfth. Education will be carried out through daily classroom instruction by teachers using a curriculum approved by the School Board of Bethlehem Christian Academy.

ARTICLE IV MANNER OF ELECTION

Officers will be appointed by the Church Council of Bethlehem Lutheran Church. They will consist of a President, Vice-President, Treasurer, Secretary, and if deemed necessary, three or more directors also appointed by the council.

ARTICLE V INITIAL DIRECTORS

Patricia Coleman President

10444 Skycrest Dr.

Jacksonville, FL 32246

Heidi Reagan Vice-President

1413 Constitution Place

Jacksonville Beach, FL 32250

Jennifer Huber Treasurer

458 10th Ave. S.

Jacksonville Beach, FL 32250

Cathy McClellan Secretary

1230 Carlotta Rd. W.

Jacksonville, FL 32216

Paul Huber Director
902 N. 4th St.
Jacksonville Beach, FL 32250

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TALLAHASSEE, FLORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Patricia Coleman
10444 Skycrest Dr.
Jacksonville, FL 32246

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia Coleman
10444 Skycrest Dr.
Jacksonville, FL 32246

ARTICLE VIII DISSOLUTION

Upon dissolution of this corporation all assets will be distributed for one or more exempt purposes within the meaning of section 501(c)(3) on the Internal Revenue Code or the corresponding section of any future federal tax code.

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.

Patricia Coleman
Signature/Registered Agent

11/14/03
Date

Patricia Coleman
Printed Name/Registered Agent

Patricia Coleman
Signature/Incorporator

11/14/03
Date

Patricia Coleman
Printed Name/Incorporator