

**N0400000 814**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

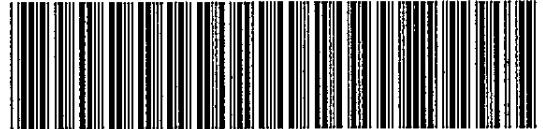
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

**SUBJECT:** Jacksonville Golf Alliance, 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:** Robert W. Johnson

Name (Printed or typed)

8825 Perimeter Park Blvd. Suite 502

Address

Jacksonville, Fl. 32216

City, State & Zip

904-338-9772

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)

**ARTICLE I NAME**

The name of the corporation shall be:

Jacksonville Golf Alliance, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

8825 Perimeter Park Blvd.  
Suite 502  
Jacksonville, Fl. 32216

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To create an awareness campaign and raise funds to support The First Tee and junior golf through the sale of a coupon book that will be created from donated discounts from various companies in the Jacksonville golf industry.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The directors will be appointed annually by the current Board of Directors.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Robert W. Johnson-President (D)	Scott Wilson- VP- (D)	Lauralee Shapiro- Secty- (D)	Dennis Gibson- (D)
8825 Perimeter Park Blvd.	3826 Vickers Lake Dr.	3826 Vickers Lake Dr.	8825 Perimeter Park Bld
Suite 502	Jacksonville, Fl. 32224	Jacksonville, Fl. 32224	Suite 502
Jacksonville, Fl. 32216			Jacksonville, Fl. 32216

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

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Robert W. Johnson  
8825 Perimeter Park Blvd.  
Suite 502  
Jacksonville, Fl. 32216

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Robert W. Johnson  
8825 Perimeter Park Blvd.- Suite 502  
Jacksonville, Fl. 32216

\*\*\*\*\*

*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

8/16/04  
\_\_\_\_\_  
Date

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

8/16/04  
\_\_\_\_\_  
Date

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