

NO4000011554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

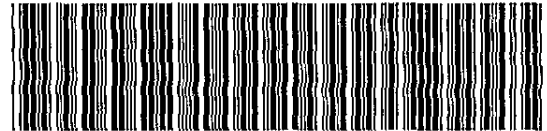
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100036226191

12/10/04--01034--001 \*\*78.75

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04 DEC 10 PM 2:21

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CLERK  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

01/12/11

CORP DIRECT AGENTS, INC. (formerly CCRS)  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: TRICIA TADLOCK

DATE: 12-10-04

REF. #: 0027.32688

CORP. NAME: CORAL SPRINGS TITANS BASKETBALL CLUB, INC.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> (XX) ARTICLES OF INCORPORATION (NOT-FOR-PROFIT) | <input type="checkbox"/> ( ) ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ( ) ANNUAL REPORT  | <input type="checkbox"/> ( ) TRADEMARK/SERVICE MARK  |
| <input type="checkbox"/> ( ) FOREIGN QUALIFICATION                                  | <input type="checkbox"/> ( ) FICTITIOUS NAME         |
| <input type="checkbox"/> ( ) REINSTATEMENT  | <input type="checkbox"/> ( ) LIMITED PARTNERSHIP     |
| <input type="checkbox"/> ( ) CERTIFICATE OF CANCELLATION                            | <input type="checkbox"/> ( ) LIMITED LIABILITY       |
| <input type="checkbox"/> ( ) OTHER:   | <input type="checkbox"/> ( ) MERGER                  |
|   | <input type="checkbox"/> ( ) WITHDRAWAL              |

STATE FEES PREPAID WITH CHECK# 510602 FOR \$ 78.75.

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

✓

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> (XX) CERTIFIED COPY | <input type="checkbox"/> ( ) CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> ( ) PLAIN STAMPED COPY |
| <input type="checkbox"/> ( ) CERTIFICATE OF STATUS      |   |   |

Examiner's Initials

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

**ARTICLE I NAME**

The name of the corporation shall be:

Coral Springs Titans Basketball Club, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

9621 N.W. 41st Street, Coral Springs, FL 33065

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose for which the corporation is organized is to provide an entity for a youth basketball club in order that sponsorships maybe obtained.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Directors are elected by majority vote.

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

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

Stuart Kosloff, President, 9621 N.W. 41st Street, Coral Springs, FL 33065  
Sharon Kosloff, Secretary/Treasurer, 9621 N.W. 41st ST., Coral Springs, FL 33065

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

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

Arthur P. Cohen, P.A., Pinnacle Corporate Park, Suite 300, 500 W.  
Cypress Creek Road, Ft. Lauderdale, FL 33309

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

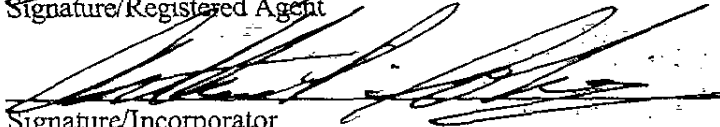
Arthur P. Cohen, P.A., Pinnacle Corporate Park, Suite 300, 500 W.  
Cypress Creek Road, Ft. Lauderdale, FL 33309

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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

12-9-04  
Date

  
Signature/Incorporator

12-9-04  
Date

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TALLAHASSEE, FLORIDA