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TRANSMITTAL LETTER

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

SUBJECT: Coral Springs H.S. Lacrosse Club 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 Status

□\$78.75 Filing Fee & Certified Copy □ \$87.50 Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: Madeline Nardone

Name (Printed or typed)

8700 NW 49th Drive

Àddress

Coral Springs, Florida 33067 City, State & Zip

754-224-9826

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:

Coral Springs H.S. Lacrosse Club Inc.

ARTICLE II PRINCIPAL OFFICE

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

8700 NW 49th Drive Coral Springs, Florida 33067

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To serve as a vehicle to promote team work, good sportsmanship, educational achievement and build character through athletic competition. Shall be self-funded and shall have fund raising to support club costs including but not limited to; referees, jerseys, equipment, insurance and liability coverage and costs from participating in the club activities and contests.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The election shall be under the direction of the elections committee and shall be elected by the membership of the Club.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

	· ·						
Madeline Nardone,		re, Coral Springs, Flo		President			
Martin Ford,		et, Coral Springs, Fl		Vice President			
Christopher Nardone,		re, Coral Springs, Flo		Treasurer (Incorp	orator / Ag	ent)	
Helen Nicoll,		ace, Coral Springs,		Secretary			
Rayetta Lindsey,	4020 NW 61st Way	r, Coral Springs, Flor	ida 33067,	Vice Secretary	50	10	· -
						5	-
and the second sec		RED AGENT AND			MAY	Se	· _ 4
The <u>name and Florid</u>	<u>a street address_</u> (P	.O. Box NOT accep	table) of the reg	sistered agent is:	-	22-	
Christopher Nardone					5	~ <u>S</u> =	<u>.</u>
8700 NW 49th Drive					P	39th	
Coral Springs, Florida	33067						· #
					မ္မ	AA	Ξ.
ARTICLE VII IN	<u>CORPORATOR</u>		د مشد.د .		27	57	
The name and address	ss of the Incorporate	r is:			~~~	HS	
Christopher Nardone							
8700 NW 49th Drive							
Coral Springs, Florida 3	33067	•		= .			•
*****	*****	*****	****	******	*****	***	
Having been named as regi	istered agent to accep	t service of process fo	r the above stated	l corvoration at the	place desig	nated	
in this certificate, I am fam							
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Signature/Registered	ent -		د	Date	······································		

Signature/Incorporator

05/15/05 Date