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SECRETARY  
FALL 2005

## TRANSMITTAL LETTER

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

SUBJECT: Bill Travis, 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: Bill Travis  
Name (Printed or typed)

6542 Hippodrome Rd, Ste 318  
Address

Lake Wales FL 33467  
City, State & Zip

561.742.4128  
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: *Bill Travis, Inc.*

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE II PRINCIPAL OFFICE**

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

*6542 Hypoluxo Road, Suite 318, Lake Worth, FL 33467*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: *Contemporary Christian Ministry specializing in the areas of, but not limited to: music, literary, and any form of commercial art.*

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

*Board members appointed by the officers.*

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

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

*Bill TRAVIS, PRESIDENT/TREASURER, 6542 Hypoluxo Rd. Ste 318, Lake Worth, FL 33467*  
*MICHAEL S. Zdanowicz, VICE PRES./Reg. Agent, 14703 Cactus Wren Place, TAMPA, FL 33625*  
*JAMES TRAVIS, SECRETARY, 6542 Hypoluxo Rd. Ste 318, LAKE WORTH, FL 33467*

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

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

*MICHAEL S. Zdanowicz, 14703 Cactus Wren Place, TAMPA, FL 33625*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Bill TRAVIS, 6542 Hypoluxo Rd. Suite 318, LAKE WORTH, FL 33467*

\*\*\*\*\*  
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.

*Michael S. Zdanowicz*  
\_\_\_\_\_  
Signature/Registered Agent

*06-27-08*  
\_\_\_\_\_  
Date

*Bill Travis*  
\_\_\_\_\_  
Signature/Incorporator

*06-27-2005*  
\_\_\_\_\_  
Date