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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

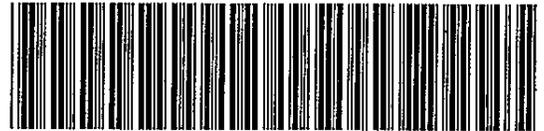
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
J. SHASSEE, FILIPINO

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J. Strivers AUG 22 2005

TRANSMITTAL LETTER

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

SUBJECT: Resident Council of Flossie M. Riley Gaeden Apartments 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: Barbara Jean Hall
Name (Printed or typed)

4258 Michigan Link Ave. Apt. #1
Address

Fort Myers, FL. 33916
City, State & Zip

239-878-0316 / H 226-9244
Daytime Telephone number

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SECRETARY OF STATE
TALLAHASSEE, FL 32314

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:

Resident Council Of Flossie M. Riley garden apartments, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4258 Michigan Link Ave. #1
Fort Myers, FL. 33916

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- Section 1. included, but not Limited to, common need, suggestions, and recommend to the Housing Authority of the City Fort Myers, Florida
- Section 2. Improve living condition in Flossie M. Riley Garden Apts.
- Section 3. promote neighborliness and harmony among residents of Flossie M. Riley Garden Apts.(see attach *)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

- section 1. Must be eighteen years of age and a current leasehold and in good standing with the Housing Authority pay dues if any, must be paid in full.
- section 2. Must not be an agent of Management or its employees, or a family member in such.
- section 3. nominating committee shall do a slate of Officer, anyone can add to the slate before (30) is up.(*)

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Barbara J. Hall- president, Birdie Wicks- vice-president, Michael Broadfoot- treasurer, Dinah Aponte- secretary
Jeanette Henderson-parliamentarian.

ARTICLE VI INTIAL REGISTERED AGENT AND STREET ADDRESS

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

4258 Michigan Link Ave.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Resident Council of Flossie M. Riley Garden Apts. Inc.

4258 Michigan Ave Link # 1

Fort Myers FL 33916

Barbara Hall

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.

Barbara J. Hall, Barbara Hall
Signature/Registered Agent

8-5-05
Date

Barbara J. Hall
Signature/Incorporator

8-5-05
Date

SECRETARY OF STATE
OFFICE OF THE
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