

N 05000011866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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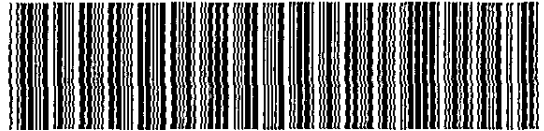
(Business Entity Name)

(Document Number)

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TALLAHASSEE FL 9011

J. Shivers NOV 28 2005

1005-51372

## COVER LETTER

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

**SUBJECT:** Little Dreams Foundation, 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:** Nathan L Skipper

Name (Printed or typed)

6 Jimmy Lee Rd.

Address

Winter Haven, FL 33880

City, State & Zip

863 604 7391 / 863 648 4474

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

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SECRETARY OF STATE  
TALLAHASSEE, FL 32314

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

**ARTICLE I NAME**

The name of the corporation shall be:

Little Dreams Foundation, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

6 Jimmy Lee Rd  
Winter Haven, Fl. 33880

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Care for children when they first come in to foster care, til they can to be placed in a foster home or can go to a family member.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

By their quailifications and education needed for the position.

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

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

Nathan L Skipper-Founder/President  
Donna L Skipper-Treasurer  
Joanne Carter-Secretary

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

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

6 Jimmy Lee Rd,  
Winter Haven, Fl. 33880  
Nathan Skipper

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Nathan L Skipper  
6 Jimmy Lee Rd.  
Winter Haven, Fl. 33880

\*\*\*\*\*

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.

Nathan L Skipper  
Signature/Registered Agent

11/8/05  
Date

Nathan L Skipper  
Signature/Incorporator

11/8/05  
Date

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05 NOV 23 AM 1:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA