

NO60000001819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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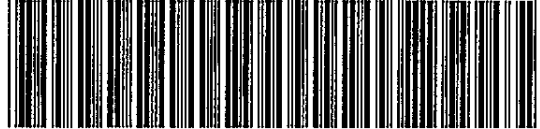
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 FEB 16 PM 1:03

COVER LETTER

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

SUBJECT: St. Augustine Airport Pilots Association, 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: Jack Reilly

Name (Printed or typed)

122 Willow Pond Lane

Address

Ponte Vedra Beach, FL 32082

City, State & Zip

904-425-4900

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:

St. Augustine Airport Pilots Association, Inc.

ARTICLE II PRINCIPAL OFFICE

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

147 San Marco Avenue
St. Augustine, FL 32084

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To further the interest of the general public in aviation related matters, relating particularly to the St. Augustine Airport in St. Augustine, FL., and the surrounding area.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Elected annually by vote of members

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jack Reilly
122 Willow Pond Lane
Ponte Vedra Beach, FL 32082

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jack Reilly
122 Willow Pond Lane
Ponte Vedra Beach, FL 32082

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

2/9/06

Date



Signature/Incorporator

2/9/06

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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