

N06000004716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

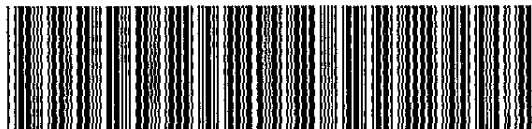
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/28/06--01045--002 \*\*78.75

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06 APR 28 AM 10:11  
TALLAHASSEE, FLORIDA

J. Shivers MAY 10 2006

## COVER LETTER

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

SUBJECT: Brian Samson KWHS Band Scholarship Fund, 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: Joanne Alexander  
Name (Printed or typed)

5555 College Road  
Address

Key West, FL 33040  
City, State & Zip

305-296-7101  
Daytime Telephone number

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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:

Brian Samson KWHS Band Scholarship Fund, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

5555 College Road  
Key West, FL 33040

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Provide annual scholarships to Key West High School graduating band member.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Appointed annually by previous year's board of directors.

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

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

Maureen Samson, 5555 College Road, Key West, FL 33040, Director, President  
Shannon Samson, 5555 College Road, Key West, FL 33040, Director, VP  
Joanne Alexander, 5555 College Road, Key West, FL 33040, Director, Treasurer  
Barbara Herzog, 5555 College Road, Key West, FL 33040, Director, 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:

Joanne Alexander  
5555 College Road  
Key West, FL 33040

**ARTICLE VII INCORPORATOR**

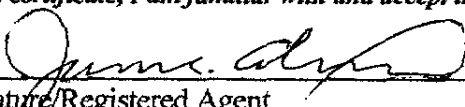
The name and address of the Incorporator is:

Joanne Alexander  
5555 College Road  
Key West, FL 33040

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TALLAHASSEE, FLORIDA

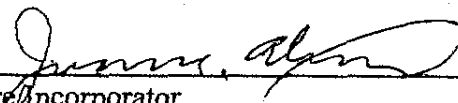
\*\*\*\*\*

*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

4/18/06

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

4/18/06

\_\_\_\_\_  
Date