# 

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

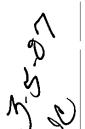


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SECRETARY OF STATE

TEMO



# **COVER LETTER**

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

SUBJECT: BCHS Class of 1987, Inc., a not for profit corporation (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original a	and one(1) copy of the Articl	es 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:	Tracy L. Coghill Name (Prin	nted or typed)	<b>~</b>
•	3080 Tamiami Trail E.  Address		
	Naples Fl 34112		

(239) 649-4900

Daytime Telephone number

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

City, State & Zip

# ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

BCHS Class of 1987, Inc., a not for profit corporation

#### ARTICLE II PRINCIPAL OFFICE

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

9225 Gulfshore Dr. N.

Naples, Florida 34108

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Facilitate Class communications, organize Class events, provide information to Class members and raise funds for Barron Collier High School

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed by prior Officers and Directors

## ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Michael Moore D/P

Tracy L. Coghill D/VP/T

Lori Collins Fagiarone D/VP/S

Heather West Billy D/VP

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

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

Tracy L. Coghill

3080 Tamiami Trail E.

Naples, Florida 34112

# ARTICLE VII INCORPORATOR

The <u>name</u> and address of the Incorporator is:

Tracy L. Coghill

3080 Tamiami Trail E.

Naples, Florida 34112

Having/Deen named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, yam familiar with And accept the appointment as registered agent and agree to act in this capacity.

Incorporate

 $\frac{3-1-07}{\text{Date}}$