

VH

COVER LETTER

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

SUBJECT: ST JOHNS FREE WILL BAPTIST CHURCH 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: ODIS WHITEHEAD
Name (Printed or typed)

3150A DOUGLAS FERRY RD
Address

BONIFAY, FL 32425
City, State & Zip

850-415-1354
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 3, 2008

ODIS WHITHEAD
3150A DOUGLAS FERRY RD
BONIFAY, FL 32425

SUBJECT: ST JOHNS FREE WILL BAPTIST CHURCH INC
Ref. Number: W08000040951

We have received your document for ST JOHNS FREE WILL BAPTIST CHURCH INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 108A00048573

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

ARTICLE I NAME

The name of the corporation shall be:

ST JOHNS FREE WILL BAPTIST CHURCH INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

975 ST JOHN RD BONIFAY, FL 32425

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CHURCH

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

ELECTED BY CONGRIGATION

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

JAMES ELMORE-PRESIDENT
P O BOX 465
COTTONDALE, FL 32431

VIRGINIA HEWETT - TREASURER - CONTACT PERSON
3759 DOUGLAS FERRY RD
BONIFAY FL 32425

ODIS WHITEHEAD-PASTOR/VICE PRESIDENT/CONTACT PERSON
3150A DOUGLAS FERRY RD BONIFAY FL 32425

PAULA LOCKE-SECRETARY
2149 PLEASANT HILL RD
BONIFAY FL 32425

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

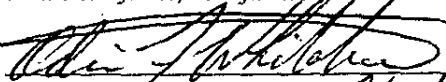
ODIS WHITEHEAD
3150A DOUGLAS FERRY RD
BONIFAY, FL 32425

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


ODIS WHITEHEAD
3150A DOUGLAS FERRY RD
BONIFAY, FL 32425

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

9/16/08
Date



Signature/Incorporator

9/16/08
Date

FILED
08 SEP 17 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA