

NO9000608508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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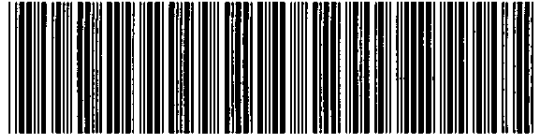
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/17/09--01065--023 **60.00

08/28/09--01001--022 **18.75

FILED

2009 AUG 28 PM 3:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 3 1:28 PM

COVER LETTER

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

SUBJECT: Dockside Community Church Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

08/17/08 - 0065-023
#6000

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: David A. Tristani
Name (Printed or typed)

404 MARION AVE
Address

Dunedin FL 34698
City, State & Zip

727 452-4126
Daytime Telephone number

Pastordave @ Dockside Community Church. Com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Dockside Community Church INC

ARTICLE II PRINCIPAL OFFICE

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

1218 New York Ave
Dunedin FL 34698

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To function as a non-profit Religious Church.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Jim Gingers 12832 Gorda Circle W. Largo fl 33773
Diane Holmes 1949 East Skyline Dr. Clearwater FL 33763
Judson Seely 1003 Carlton St. Clearwater FL 33755

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

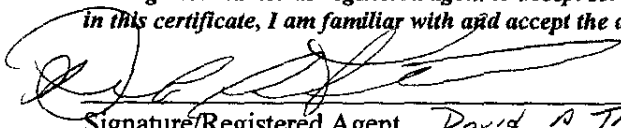
David A. Tristani
404 Marjon Ave
Dunedin FL 34698

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David A Tristani
404 Marjon Ave
Dunedin FL 34698

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 David A Tristani

8-24-09
Date


Signature/Incorporator

8-24-09
Date

David A. Tristani

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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