

**N 09 000011072**

(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:

**W09-49026**

Office Use Only



**200162204672**

11/03/09--01030--019 \*\*87.50

**FILED**

**2009 NOV 16 PM 4:30**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**T. Bureh NOV 17 2009**

## COVER LETTER

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

**SUBJECT:** HOPE Academy for Autism on the Emerald Coast  
(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:** Sandra D. Hastings  
Name (Printed or typed)

8555 Corbin Court  
Address

Navarre , FL 32566  
City, State & Zip

850-723-3186  
Daytime Telephone number

sandyhastings@earthlink.net  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 4, 2009

SANDRA D HASTINGS  
8555 CORBIN COURT  
NAVARRE, FL 32566

SUBJECT: HOPE ACADEMY FOR AUTISM ON THE EMERALD COAST  
Ref. Number: W09000049026

We have received your document for HOPE ACADEMY FOR AUTISM ON THE EMERALD COAST and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

An effective date may be added to the Articles of Incorporation if a 2010 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 609A00034821

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

**ARTICLE I NAME**

The name of the corporation shall be:  
HOPE Academy for Autism on the Emerald Coast, *Inc.*

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:  
8555 Corbin Court  
Navarre, FL 32566

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
To establish and provide educational and ancillary services to children with autism

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:  
As provided for in the By-Laws

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

List name(s), address(es) and specific title(s):  
Sandra D. Hastings - President

8555 Corbin Court  
Navarre, FL 32566

David Triana - Vice-President  
2210 Gozo Court  
Navarre, FL 32566

Jacqueline Hislop - Treasurer  
P.O. Box 5878  
Navarre, FL 32566

Cynthia Pound - Secretary  
208 Navarre Street  
Gulf Breeze, FL 32561

FILED  
2009 NOV 16 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

Sandra D. Hastings - President

8555 Corbin Court

Navarre, FL 32566

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Sandra D. Hastings - President

8555 Corbin Court

Navarre, FL 32566

\*\*\*\*\*  
\*\*\*\*\*

*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.*

*Sandra D. Hastings*  
Signature/Registered Agent      *Sandra D. Hastings*

*10/28/09*  
Date

*Sandra D. Hastings*  
Signature/Incorporator      *Sandra D. Hastings*

*10/28/09*  
Date