N10000003844

(Re	equestor's Name)			
•				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certified Copies Certificates of Status			
Considerations to	Fili Offi			
Special Instructions to Filing Officer:				

Office Use Only



600175911366

04/16/10--01008--005 **70.00

18 APR 16 PH 12: 07

SECRETARY OF STATE

B McKnight APR 1 9 2010

COVER LETTER

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

SUBJECT:	The BPOE Lodge 829 Educational Trust Corporation			
	(PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u>	DE SUFFIX)	
Enclosed is an original	and one (1) copy of the Artic	eles of Incorporation and	a check for :	
√ \$70.00 Filing Fee	s78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FROM:	Kartl B Masters	nted or typed)	-	
	5354 Riverview Dr			
Address				
	St Augustine FI 32080 City, State & Zip			
	904 471 8692 Daytime Tele	ephone number	-	
	geoapril@yahoo.net E-mail address: (to be used for fu	ture annual report notification	,	

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:

The Benevolent Protective Order of Elks Lodge 829 Educational Trust Corporation Federal EIN Number 59-3486077, 501C3 Corporation

ARTICLE II PRINCIPAL OFFICE

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

14 20 A1A South, St Augustine Fl 32080

Mailing Address PO Drawer 238 St Augustine FI 32085-0238

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To hold in Trust donations for the purpose of awarding Scholarships to Students

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed by the Exalted Ruler, BPOE 829

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Masters, Karl B 5354 Riverview Dr St Augustiane, Fl 32080 Chairman Board of Trustees Swindull, Karl J, 2 Park Terrace Dr. St Augustine Fl m32080 Trustee Lee, David 120 Orange tree Rd, East Palatka Fl 32131 Trustee Meredith, Olan 1412 San Rafael Ct St Augustine Fl 32080 Trustee

Catuto, Robert 17 Lindburg Rd Palm Coast Fl 32137-9500 Trustee

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Karl B Masters

5354 Riverview Dr

St Augustine FI 32080

ARTICLE VII INCORPORATOR

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

Fred Dupont

1420 A1A South

St Augustine, Fl 32080

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/Incorporator

<u>4/11/2010</u>
Date

<u>4/11/2010</u>
Date