



**COVER LETTER**

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

**SUBJECT:** Polk County Blind Veterans, 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:** Bob Fick, President  
Name (Printed or typed)

9834 Moorhen Drive  
Address

Lakeland, FL 33810  
City, State & Zip

866-853-1139  
Daytime Telephone number

bobfick4@verizon.net  
E-mail address: (to be used for future 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)

**FILED**  
2010 MAY -4 P 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:  
Polk County Blind Veterans, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:  
9834 Moorhen Drive, Lakeland, FL 33810

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Blind Veterans helping blind veterans

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:  
  
A majority of all voting members present at the general meeting held each January shall determine by written ballot the election of officers.

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

List name(s), address(es) and specific title(s):  
Bob Fick, 9834 Moorhen Drive, Lakeland, FL 33810 - President  
Ron Welch, 10030 Rockridge Rd., Lakeland, FL 33810 Vice President  
Gigi Mathis, 2852 Chatsworth Lane, Lakeland, FL 33813-Secretary  
Mary Ann Lee, 2025 Sylvester Rd., Q-1, Lakeland, FL 33803 Treasurer

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

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
  
Bob Fick, 9834 Moorhen Dr., Lakeland, FL 33810  
Moorhen Dr.

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
  
Bob Fick, 9834 Moorhen Dr., Lakeland, FL 33810

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*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.*

*Robert H. Fick*

Signature/Registered Agent

*Robert H. Fick*

Signature/Incorporator

*4/29/10*

Date

*4/27/10*

Date

INCORPORATED BY 33810-5390  
9834 MOORHEN DR  
BOB AND GIGI FICK