

N10000009697

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(Business Entity Name)

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10 OCT 15 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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10 OCT 15 AM 10:56

COVER LETTER

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

**SUBJECT:** The First Presbyterian Church of Havana, 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:** Jim Love  
Name (Printed or typed)

596 Leslie Lewis Rd.  
Address

Havana, FL 32333  
City, State & Zip

850-510-8239  
Daytime Telephone number

jplove33@gmail.com  
E-mail address: (to be used for future annual report notification)

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

In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The First Presbyterian Church of Havana, Inc.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

213 First Street, NE  
Havana, Florida 32333

Mailing address, if different is:

First Presbyterian Church  
P.O. Box 707  
Havana, Florida 32333

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To limit the liability of the congregation and to conform with the wishes of the Presbytery.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

The directors are elected and appointed by the Session of the First Presbyterian Church of Havana

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

Name and Title: Bill Brundyge, President  
Address: 711 FL-GA Hwy  
Havana, FL 32333

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Nesta Cumbie, Vice-President  
Address: 404 Live Oak Lane, West  
Havana, FL 32333

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Jim Love  
Address: 596 Leslie Lewis Rd.  
Havana, FL 32333

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Jim Love, Secretary  
Address: 596 Leslie Lewis Rd.  
Havana, FL 32333

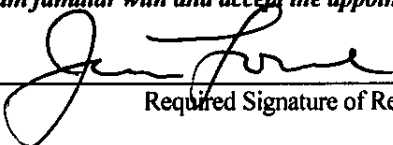
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jim Love  
Address: 596 Leslie Lewis Rd.  
Havana, FL 32333

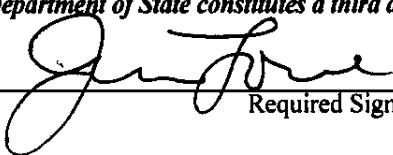
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

10/11/10  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature of Incorporator

10/11/10  
Date