

N10000010639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

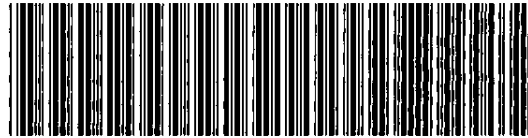
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 NOV 10 PM 3:44

APPROVED
AND
FILED

1/1

COVER LETTER

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

SUBJECT: OAK GROVE PRIMITIVE BAPTIST CHURCH, 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: L. Michelle Ketchen
Name (Printed or typed)

P.O. Box 472
Address

Highland City FL 33846
City, State & Zip

863-510-8096
Daytime Telephone number

godschildml@yahoo.com
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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

OAK GROVE PRIMITIVE BAPTIST CHURCH, INC.

10 NOV 10 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

11230 E SLIGH AVE SEFNER, FLORIDA

MAILING ADDRESS: 1801 MARYLAND AVENUE PLANT CITY, FL 33566

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To

TO PROCLAIM THE GOOD NEWS OF JESUS CHRIST. TO MINISTER TO THE NEEDS
OF THE MEMBERS.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

BY CHURCH MEMBER VOTE

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

HOWELL JORDON 1801 MARYLAND AVE PLANT CITY FL 33566 DIRECTOR
ESSIE FOLSOM 1916 MAYDELL DRIVE TAMPA, FL 33619 SECRETARY
DONALD BLANTON 13561 CHERRY TREE LANE THONOTOSASSA, FL 33592 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:

HOWELL JORDON
1801 MARYLAND AVE
PLANT CITY, FL 33566

ARTICLE VII INCORPORATOR

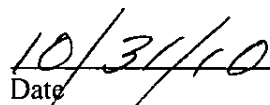
The name and address of the Incorporator is:

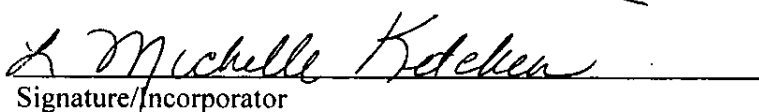
MICHELLE KETCHEN
P O BOX 472

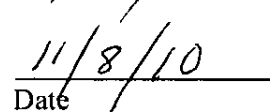
4108 CENTRAL AVE SW HIGHLAND CITY, FL 33846

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


Date


Signature/Incorporator


Date