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COVER LETTER

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

SUBJECT: Community Re-Entry Academy, Incorp. (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 \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee & Filing Fee Filing Fee. Certificate of & Certified Copy Certified Copy Status & Certificate ADDITIONAL COPY REQUIRED Joni C. Stewart FROM: Name (Printed or typed) 310 E. Oak Avenue DEC -8 P 3: Tampa, Florida 33602 City, State & Zip 813-277-0080 310 East Oak A Tempsone number joni@jstewartlcsw.com 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 17, 2010

JONI C. STEWART 310 E OAK AVENUE TAMPA, FL 33602

SUBJECT: COMMUNITY RE-ENTRY ACADEMY Ref. Number: W10000053985

We have received your document for COMMUNITY RE-ENTRY ACADEMY and your check(s) totaling \$70.00. 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.

Please return 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) 245-6913.

Diane Cushing Regulatory Specialist II Supervisor

Letter Number: 810A00027033

www.sunbiz.org

· · · ·	ARTICLES OF IN In compliance with Chapter	CORPORATION 617, F.S., (Not for Pr	l ofit)
ARTICLE I The name of the c	NAME Community Re-Entry A		
<u>ARTICLE II</u>	PRINCIPAL OFFICE Principal <u>street</u> address 310 East Oak Avenue		Mailin 2018 dt & Scift d Bfer Finis Cift
	Tampa, Elorida 33602	<u> </u>	SECRETARY DE STATE TALLAHASSEE, FLORIDA
	PURPOSE which the corporation is organized is: rograms and services for those who ar	e re-entering the	community.
ARTICLE IV Elected	MANNER OF ELECTION The manner in v	which the directors are e	elected and appointed:
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	RS	
Name and T Address:	itle: Eileen O'Brien, President <u>3111 West MLK Boule, Suite 100</u> Tampa, Florida 33607	Name and Title: De Address: 450	nnese Brereton, Treasurer 00 Flat Point Drive, Apt. #1 on, Colorado 81620
Name and T Address:	itle:Christine Volk, Vice President 4653 Ashburn Square Drive Tampa, Florida 33610	Address: <u>31</u>	chael Fluker, Board Member D East Oak Avenue mpa, Florida 33602
Name and T Address:	itle: Leesil Ainslie, Secretary 310 East Oak Avenue Tampa, Florida 33602	Name and Title: Address:	
		·	
ARTICLE VI	<u>REGISTERED AGENT</u> prida street address (P.O. Box NOT acceptable) of t	di	
Name: Address:	Joni C. Stewart 310 East Oak Avenue Tampa, Elorida 33602		
ARTICLE VII The name and ad	INCORPORATOR dress of the Incorporator is:		
Name:	Joni C. Stewart		
Address:	310 East Oak Avenue Tampa, Florida 33602		
Having been -nam certificate, I am fa	eed as registered agent to accept service of process miliar with and accept the appointment as registered Additional Accept the appointment as registered Required Signature of Registered Agent	s for the above stated d agent and agree to a	corporation at the place designated in this ct in this capacity

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

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