NICODO OT DY

(Degree stade Negree)				
(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
•				
Special Instructions to Filing Officer:				

Office Use Only



500191843525

01/20/11--01004--025 **87.50

11 JAN 20 PH 4: 20

PS 1/4/11

COVER LETTER

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

Sawa	rass Club of Coo	dar Kov Inc			
SUBJECT: Sawy	rass Club of Cec	TE NAME – <u>MUST INCLI</u>	JDE SUFFIX)		
Enclosed is an original a	and one (1) copy of the Art \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate		
FROM: Pam Oakley Name (Printed or typed)					
12416 SR 24 Address					
Cedar Key, Florida 32625 City, State & Zip					
352-543-0809					
12416 SRD24/time Telephone number					

PMOakley@bellsouth.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)

The name of the	Sawgrass Club of Ce corporation shall be:	edar Key, Inc.	
The lighte of the c	topological state the.		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	•	Mailing address, if different is:
	12416 SR 24		
	Cedar Key, Florida	 .	
	.32625		
ARTICLE III	PURPOSE		
The purpose for	which the corporation is organized is:		
• •	tion is organized by a private group to ex	clusively for ch	paritable and educational nurnoses
including, for		ns to organizati	ions that qualify as exempt organizations
ARTICLE IV	MANNER OF ELECTION The manner in	which the director	s are elected and appointed:
Said Corpora	ation will vote for Directors at the Annua	al General Me	eting by a majority vote of its members
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO		oung by a majority rote of no monacord
	Fittle: Peter W Hooper, President		::Pratima Hooper, Secretary/ Treasure
Address:	Post Office Box 608	Address:	Post Office Box 608
Tracti Cite	Cedar Key, Florida 32625		Cedar Key, Florida 32625
			
Name and	Fitte:Pam M Oakley, Vice President	Name and Title	: Judy Duvall, Vi <u>ce President</u>
Address:	12416 SR 24	Address:	Post Office Box 310
	Cedar Key, Florida 32625		Cedar Key, Florida 32625
		_	
Name and '	Fitle: Cindy Leiner, Asst Sec. /Treasury	Name and Title	: Steven Morral, Director &
Address:	Post Office Box 614	Name and Thre 	Craig Mc Call, Director
r teleff c.m.,	Cedar Key, Florida 32625	7 1007 0000	
		- -	
ADDICI E UI	DECICTEDED ACENT		
ARTICLE VI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o	f the registered age	nt ie:
Name:	Pam Oakley, VP	i inc registered age	the left.
Address:	12416 SR 24	·	The first of the f
110010	Cedar Key, Florida 32625		
	COURT TO J. I. INCHMIN COURT	_	
		_	
ARTICLE VII	INCORPORATOR		
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	Pam Oakely, VP	-	
Address:	12416 SR 24		
	Cedar Key, Florida 32625	_	20 N
		_	0)
Havina been nan	ned as registered agent to accept service of proce	ess for the above :	stated corporation at the place designated in this
	uniliar with and accept the appointment as register		
		., .,	
-/	5 VII Carle	7	1-9-11
	Required Signature of Registered Agent	/	<u> </u>
l submit thi <u>s d</u> ocu	iment and affirm that the facts stated herein are ti	rue. I am aware th	at any false information submitted in a document
to the Departmen	of State constitutes a third degree felony as provid	led for in s.817.155	5, F.S.
	$(V \mid \mathcal{L}) - II$		/ a /
T 9	- I'l Capley		1-7-11
	Required Signature of Incorporator		Date
	· · · · · · · · · · · · · · · · · · ·		