

WII 0000001875

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12/23/10--01030--005 **80.00

(Business Entity Name)

(Document Number)

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W10000059851

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 2/23

COVER LETTER

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

SUBJECT: New Horizons, 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: Jacqueline Louise Sciven
Name (Printed or typed)

366 Beaumonte Avenue
Address

Kissimmee Florida 34714
City, State & Zip

407-288-4269
Daytime Telephone number

ScivenJackie 34@yahoo.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

December 27, 2010

JACQUELINE LOUISE SCIVEN
366 BEAUMONTE AVENUE
KISSIMMEE, FL 34714

SUBJECT: NEW HORIZONS INC.
Ref. Number: W10000059351

We have received your document for NEW HORIZONS INC. and your check(s) totaling \$80.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

An effective date may be added to the Articles of Incorporation if a 2011 date is needed, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 910A00029816

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: New Horizons of Kissimmee, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

508 Koala Drive,
Kissimmee, FL 34759

Mailing address, if different is:

508 Koala Drive
Kissimmee, FL 34759

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To give first time juvenile offenders/kids a chance to redeem themselves and to send a productive/certified individual back into the community.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

AS STATED IN THE BY-LAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jacqueline L. Serviven

Address: Executive Director

508 Koala Drive
Kissimmee, FL 34759

Name and Title:

Mr. Eddie Delvalle - OFFICER

Address:

3501 W. Vinet Street Suite 200
Orlando, FL 32815

Name and Title: Mr. Burney Vaughan

Address: Director

8500 Laurel Hill Drive
Orlando, FL 32818

Name and Title: Melva Sims - TREA.

Address:

1725 Forhall Circle
Kissimmee, FL

Name and Title: Mr. Steve DelSmyer - P

Address:

823 West Central Avenue
Orlando, FL 32815

Name and Title:

Ms. Mwendu Clinton - Sec

Address:

4938 Polaris St.
Orlando, FL 32819

ARTICLE VI REGISTERED AGENT

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

Name: Jacqueline L. Serviven

Address: 508 Koala Drive

Kissimmee, FL
34759

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Jacqueline L. Serviven

Address: 508 Koala Drive

Kissimmee, FL
34759

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

C. L. Serviven

Required Signature of Registered Agent

12/16/2010

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.

C. L. Serviven

Required Signature of Incorporator

12/16/2010

Date