N/10003222

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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COVER LETTER

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

SUBJECT: Longboat Key Health Care Foundation, 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
,	La Company (1997)	ADDITIONAL C	OPY REQUIRED
FROM	Gerald M. Feder	nted or typed)	
	3030 Grand Bay	Blvd. #311	_
	Longboat Key, FL	_ 34228 ate & Zip	_
	941-387-2027		
	3060 GraResingle		
		1 8 1 .	

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

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

The name of the c	NAME Longboat Key Health orporation shall be:	Care Foundat	tion, Inc.
ARTICLE II	PRINCIPAL OFFICE Principal street address 3060 Grand Bay Blvd. #161		Mailing address, if different is:
	Longboat Key, FL 34228		
ARTICLE III	<u>PURPOSE</u>		
The purpose for v	which the corporation is organized is:		
	nd sponsor high quality medical sen edical care to the Longboat Key and	•	• •
ARTICLE IV	MANNER OF ELECTION The manner	in which the directo	rs are elected and appointed:
Sponsoring (group selects initial directors and offi	icers.	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT		
	itle: Robert Baldwin, Director 3606 Fair Oaks Place		e: Lou Lasday, Director 360 Gulf of Mexico Drive #321
Address:	Longboat Key, FL 34228	Address:	Longboat Key, FL 34228
			
Name and T	itle:Marie Kropp, Executive Director	Name and Titl	e-Andrew Vac Director
Address:	3060 Grand Bay Blvd. #161		595 Bay Isles Road, Suite 120-C
	Longboat Key, FL 34228		Longboat Key, FL 34228
Name and T	Citle: Gerald M. Feder, Director	 Name and Titl	e:
Address:	3030 Grand Bay Blvd, #311		<u> </u>
	Longboat Key, FL 34228		
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable)	of the registered ag	ent is:
Name:	Gerald M. Feder		├ - ○
Address:	3030 Grand Bay Blvd. #311		MA 2
	Longboat Key, FL 34228		28 28
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		<u></u> ΞΞ, ω
Name:	Marie Kropp		A Section of the sect
Address:	3060 Grand Bay Blvd. #161 Longboat Key, FL 34228		·
	ned as registered agent to accept service of pro amiliar with and accept the appointment as regist		stated corporation at the place designated in this see to act in this capacity
O P	Required Signature of Registered Agent	<u> </u>	Date
رع (2) I submit this docu to the Denartment	CHLD M. FEDEL— iment and affirm that the facts stated herein are t of State constitutes a third degree felony as pro	e true. I am aware t vided for in \$817.19	that any false information submitted in a document
m >		-	zbo lu
11/am	Required Signature of Incorporate	or	Date
MAR	Required Signature of Incorporate G. KROPP		