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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 4/6

COVER LETTER

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

SUBJECT: United Christian Ministries of Florida, 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: Michael F. Glass
Name (Printed or typed)

7136 Arboretum Way
Address

New Port Richey, FL 34655
City, State & Zip

727/372-0204
7136 ARB 0204-0204
Telephone number

LMG636@verizon.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)

ARTICLE I NAME

The name of the corporation shall be: **UNITED CHRISTIAN MINISTRIES OF FLORIDA, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

7136 ARBORETUM WAY
NEW PORT RICHEY, FL 34655

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE RESOURCES FOR PUBLIC BENEFIT, LOCALLY, NATIONALLY, AND INTERNATIONALLY,
TO INCLUDE, BUT NOT LIMITED TO, CHRISTIAN RELIGIOUS SERVICES, CHRISTIAN MINISTRY,
TRAINING, CHRISTIAN EDUCATIONAL, HEALTH AND SOCIAL SERVICES, SHELTER AND PROVISIONS.

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

BOARD IS APPOINTED AND DISMISSED BY THE PRESIDENT.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL F. GLASS, PRESIDENT

Address: 7136 ARBORETUM WAY
NEW PORT RICHEY, FL 34655

Name and Title: _____

Address: _____

Name and Title: LINDA M. GLASS, SEC

Address: 7136 ARBORETUM WAY
NEW PORT RICHEY, FL 34655

Name and Title: _____

Address: _____

Name and Title: LINDA M. GLASS, TREA

Address: 7136 ARBORETUM WAY
NEW PORT RICHEY, FL 34655

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: MICHAEL F. GLASS

Address: 7136 ARBORETUM WAY
NEW PORT RICHEY, FL 34655

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MICHAEL F. GLASS

Address: 7136 ARBORETUM WAY
NEW PORT RICHEY, FL 34655

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

Michael F. Glass
Required Signature of Registered Agent

3-31-11
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.

Michael F. Glass
Required Signature of Incorporator

3-31-11
Date