

N110000003564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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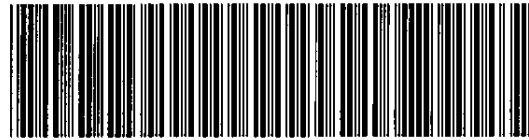
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 4/7

COVER LETTER

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

SUBJECT: AFP FL Charlotte Harbor Chapter, 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: M Suzanne Roberts
Name (Printed or typed)

21450 Gibraltar Drive
Address

Port Charlotte FL 33952
City, State & Zip

941-766-9570
Daytime Telephone number

SRoberts@volunteercare.org
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: AFP FL Charlotte Harbor Chapter, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
17831 Murdock Circle, Suite A
Port Charlotte, FL 33948

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Association of Fund Raising Professionals

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:
Elected by the membership by majority vote.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cecy Glean, President/Director
Address: 17831 Murdock Circle
Port Charlotte, FL 33948

Name and Title: Michael Mansfield, President-Elect
Address: 17831 Murdock Circle
Port Charlotte, FL 33948

Name and Title: Barbie Arbor Via President/Director
Address: 17831 Murdock Circle
Port Charlotte, FL 33948

Name and Title: M Suzanne Roberts, Treasurer
Address: 17831 Murdock Circle
Port Charlotte, FL 33948

Name and Title: Angela Hogan, Secretary
Address: 17831 Murdock Circle
Port Charlotte, FL 33948

Name and Title: Greg Bobenich, Director
Address: 17831 Murdock Circle
Port Charlotte, FL 33948

ARTICLE VI REGISTERED AGENT

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

Name: M Suzanne Roberts
Address: 21450 Gibraltar Drive
Port Charlotte, FL 33952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: M Suzanne Roberts
Address: 21450 Gibraltar Drive
Port Charlotte, FL 33952

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

[Signature]
Required Signature of Registered Agent

[Signature]
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.

[Signature]
Required Signature of Incorporator

[Signature]
Date