

N110000004461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

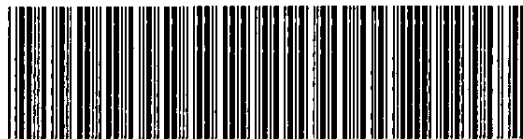
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Arthur Lawson Jr GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Ending of entity Name to  
DATE 5-5-11 INC.  
DOC. EXAM. S Collins

Office Use Only



200207019162

05/04/11--01023--011 \*\*78.75

FILED  
2011 MAY -4 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC  
5-5-11

## COVER LETTER

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

**SUBJECT: HAYWARD DUPONT HOMEOWNERS ASSOCIATION**  
(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: Arthur L. Lawson, Jr.  
Name (Printed or typed)

133 Hayward Dupont St.  
Address

Midway, FL 32343  
City, State & Zip

(850)694 - 1533  
133 Hayward Dupont St. phone number

arthur.lawson@gmail.com ✓  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FL 32314

2011 MAY -4 PM 2:30

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**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:

HAYWARD DUPONT HOMEOWNERS ASSOCIATION, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

133 Hayward Dupont St.

Midway, FL 32343

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Homeowners Association

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

Elected by Voters

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ron Colston / President

Address: 231 Hayward Dupont St.

Midway, FL 32343

Name and Title: Arthur Lawson, Jr. / Treasurer

Address: 133 Hayward Dupont St.

Midway, FL 32343

Name and Title: Anthony James / Secretary

Address: 155 Hayward Dupont St.

Midway, FL 32343

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Ronald Colston

Address: 231 Hayward Dupont St.

Midway, FL 32343

**ARTICLE VII INCORPORATOR**

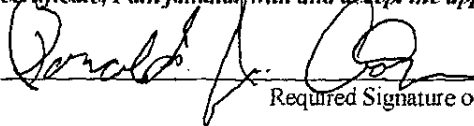
The name and address of the Incorporator is:

Name: Arthur Lawson, Jr.

Address: 133 Hayward Dupont St.

Midway, FL 32343

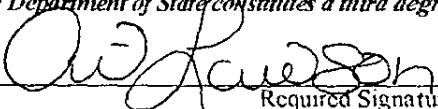
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



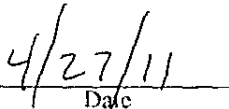
Required Signature of Registered Agent

  
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.



Required Signature of Incorporator

  
Date

SECRETARY OF STATE  
TALLAHASSEE, FL 32304

2011 MAY -4 PM 2:30

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