

111000006908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

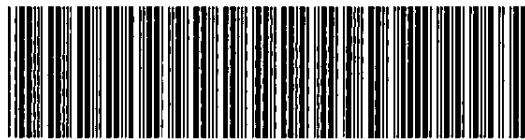
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED
M JUL 20 PM 2:46

11

COVER LETTER

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

SUBJECT: VFW MEN'S AUXILIARY POST 5690 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: DAN ELDEN
Name (Printed or typed)

23204 FREEDOM AVENUE
Address

PORT CHARLOTTE, FL 33980
City, State & Zip

941 629-4200

23204 FREEDOM AVENUE Telephone number

vfw5690@yahoo.com

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)

APPROVED
AND
FILED

14 JUL 20 PM 2:46

ARTICLE I NAME VFW MEN'S AUXILIARY POST 5690 INC

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
23204 FREEDOM AVENUE
PORT CHARLOTTE, FL 33980

Mailing address of agent is:
P.O. BOX 496557
PORT CHARLOTTE, FL 33949

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO SPONSOR OR PARTICIPATE IN ACTIVITIES OF A PATRIOTIC NATURE.

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

VOTE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DON PEYTON, PRESIDENT
Address: 7847 SW HIGHWAY 72
ARCADIA, FL 34266

Name and Title: DAN ELDEN, TREASURER
Address: 18694 KERRVILLE CIRCLE
PORT CHARLOTTE, FL 33948

Name and Title: KENNETH FULK, SENIOR VICE PRESIDENT
Address: 3505 HARBOR BLVD
PORT CHARLOTTE, FL 33952

Name and Title: DONALD F KUS, SECRETARY
Address: 24368 BUCKINGHAM WAY
PORT CHARLOTTE, FL 33980

Name and Title: LOUIS SORENSEN, JUNIOR VICE PRESIDENT
Address: 27900 LEATHERWOOD CIRCLE
PUNTA GORDA, FL 33950

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: DAN ELDEN
Address: 18694 KERRVILLE CIRCLE
PORT CHARLOTTE, FL 33948

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: DAN ELDEN
Address: 18694 KERRVILLE CIRCLE
PORT CHARLOTTE, FL 33948

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

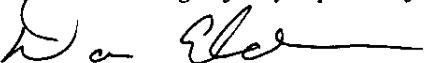


Required Signature of Registered Agent

JULY 18, 2011

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

JULY 18, 2011

Date