

W11 000007667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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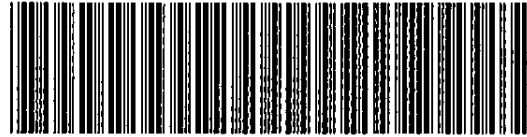
(Business Entity Name)

(Document Number)

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W11-39690

## COVER LETTER

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

SUBJECT: Hidden Treasures Outreach, 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: Jay P. Stanford  
Name (Printed or typed)

8215 Green Parrot Rd. #303  
P.O. Box 557405 Jacksonville, FL 32255  
Address

Jacksonville, FL 32256  
City, State & Zip

(321) 217-4957  
Daytime Telephone number

jay.p.stanford@gmail.com  
E-mail address: (to be used for future annual report notification)

FILED  
AUG 11 PM 1:42  
TALLAHASSEE, FL 32314  
DIVISION OF STATE  
CORPORATIONS

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**

Hidden Treasures Outreach Inc

The name of the corporation shall be:

### **ARTICLE II PRINCIPAL OFFICE**

Principal street address

8215 Green Parrot Rd

suite 303

Jacksonville, FL 32256

Mailing address, if different is:

PO Box 551465

Jacksonville, FL 32255

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose is to aide youth and families with educational tutoring and training; youth after school programs; provide senior citizen assistance; individual and family counseling; provide mentoring for at-risk youth; performing arts for at-risk youth; provide an abuse crisis center and hotline.

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

Directors are elected by board members and the nominating committee.

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

Name and Title: Jay P. Stanford/ President (P)

Address: 8215 Green Parrot Rd

suite 303

Jacksonville, FL 32256

Name and Title: Kaye Bradley/ Director (D)

Address: 6685 Queens Borough Ave

Orlando, FL 32835

Name and Title: Debra Fields-Cooper/ Director (D)

Address: 10000 Cypress Meadows

Orlando, FL 32825

Name and Title: Asante Scotts/ Director (D)

Address: 11258 Pointe Sylvan Cir

Orlando, FL 32825

Name and Title: Kevin Freeman/ Director (D)

Address: PO Box 2906

Orange Park, FL 32067

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: Jay P. Stanford

Address: 8215 Green Parrot Rd

suite 303

Jacksonville, FL 32256

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jay P. Stanford

Address: 8215 Green Parrot Rd

suite 303

Jacksonville, FL 32256

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

8/4/11

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

8/4/11

FILED  
2011 AUG 11 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399