

N11000008648

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SECRETARY OF STATE
DIVISION OF CORPORATION
2011 SEP 12 PM 3:37

9/13/11

COVER LETTER

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

SUBJECT: LIGHTHOUSES FOR HAITI, 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: BILL SHEPHERD

Name (Printed or typed)

2536 SE 30TH STREET

Address

MELROSE, FL 32666

City, State & Zip

352-316-0629

Daytime Telephone number

blfshep@yahoo.com

E-mail address: (to be used for future annual report notification)

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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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

ARTICLE I NAME

The name of the corporation shall be:

LIGHTHOUSES FOR HAITI, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

2536 SE 30TH STREET

MELROSE, FL 32666

Mailing address, if different is:

PO BOX 719

MELROSE, FL 32666

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RELIGIOUS MISSION WORK. FOCUS WILL BE MAINLY ON CHILDREN HOMES, CHURCHES AND SCHOOLS.

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

Appointed at the beginning, and then will be elected by the board when needed.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **BILL SHEPHERD, PRESIDENT**

Address: 2536 SE 30TH STREET

MELROSE, FL 32666

Name and Title: **DAVID JAROSZ, DIRECTOR**

Address: 7225 OAK HILL ROAD

KEYSTONE HEIGHTS, FL 32656

Name and Title: **BUDDY GODFREY, DIRECTOR**

Address: 502 HAWKINS DR

ROCK SPRINGS, GA 30739

Name and Title: _____

Address: _____

Name and Title: **PRISCILLA LA BOUNTY, DIRECTOR**

Address: 2538 SE 30TH STREET

MELROSE, FL 32666

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: BILLY C. SHEPHERD

Address: 2536 SE 30TH STREET

MELROSE, FL 32666

ARTICLE VII INCORPORATOR

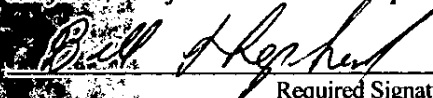
The name and address of the Incorporator is:

Name: ROSALIE JAROSZ

Address: 6539 PATTI STREET

KEYSTONE HEIGHTS, FL 32656

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

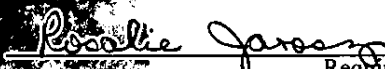


Required Signature of Registered Agent

9-9-11

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.



Required Signature of Incorporator

9-1-2011

Date