

N11000010608

(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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11 NOV 10 PM 3:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

11/1/12

MRS  
11/1/14

## COVER LETTER

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

SUBJECT: **CONCERN CITIZENS OF POLK COUNTY, 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: **Addison Brown**  
Name (Printed or typed)

**598 Ave. V NE**  
Address

**Winter Haven, FL 33881**  
City, State & Zip

**863-294-5236**  
135 Ave. Daytime Telephone number

**avbrown2@verizon.net**  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
11 NOV 10 AM 11:33  
DIVISION OF CORPORATIONS

November 2, 2011

ADDISON BROWN  
598 AVE. V NE  
WINTER HAVEN, FL 33881

SUBJECT: CONCERN CITIZNES OF POLK COUNTY, INC.  
Ref. Number: W11000055971

We have received your document for CONCERN CITIZNES OF POLK COUNTY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annuai report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap  
Regulatory Specialist II  
New Filing Section

Letter Number: 711A00024932

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Concern Citizens Of Polk County, Inc.

Effective Date: January 1, 2012

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

135 Ave. Y NE

Winter Haven, FL 33881

Mailing address, if different is:

P.O. Box 571

Winter Haven, FL 33882-0571

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To identify and assist in eliminating the cause of obstacles that hinders the quality of life in our communities.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

The manner in which the directors are elected and appointed are stated in the By-Laws.

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

Name and Title: Faye M. Bellamy, President

Address: 2231 9th Ln

Winter Haven, FL 33881

Name and Title: LaVone D. Wilcox, Treasurer

Address: 2823 Orchard Dr.

Haines City FL 33844

Name and Title: Addison Brown, Vice President

Address: 598 Ave. V NE

Winter Haven, FL 33881

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

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

Name and Title: Carolyn Speed-Green, Secretary

Address: 1835 Sherwood Lake Blvd.

Lakeland, FL 33809

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: Faye M. Bellamy

Address: 2213 9th Ln

Winter Haven, FL 33881

**ARTICLE VII INCORPORATOR**

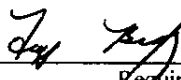
The name and address of the Incorporator is:

Name: Addison Brown

Address: 598 Ave. V NE

Winter Haven, FL 33881

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

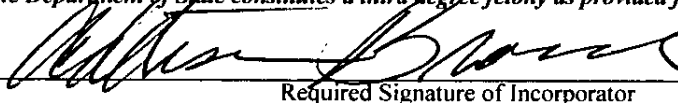


Required Signature of Registered Agent

EFFECTIVE DATE 1/1/12

11-07-11  
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

11-7-11  
Date

FILED  
11 NOV 10 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA