

NI 2000000259

(Requestor's Name)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

WH-64107

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN -9 PM 8:54

FILED

COVER LETTER

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

SUBJECT: FILING for INCORPORATION - NON PROFIT
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

IRS. EIN 45-4042750

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: MARION DAVIS
Name (Printed or typed)

357 DARMAN AVE
Address

DAVENPORT, FL 33837
City, State & Zip

1-863-242-2316
Daytime Telephone number

MDAVIS3073 @ AOL.COM
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

December 28, 2011

MARION DAVIS
357 GARMAN AVE
DAVEN PORT, FL 33837

SUBJECT: ZEPHYRHILLS SENIOR CITIZENS ASSOCIATION OF THE DEAF
Ref. Number: W11000064107

We have received your document for ZEPHYRHILLS SENIOR CITIZENS ASSOCIATION OF THE DEAF and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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 annual 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 211A00028784

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

ARTICLE I NAME

The name of the corporation shall be:

Zephyrhills Senior Citizens Association of the Deaf, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

357 Garman Avenue
Davenport, Florida 33837

Mailing address, if different is: STATE
TALLAHASSEE FLORIDA

12 JAN -9 PM 8:54

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Education for deaf and hard of hearing on change on State issues on handicap, also social activities are provided to everyone.

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

By the ZSCAD members

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Janice Pomaville, Treasurer
Address: 357 Garman Avenue
Davenport, Florida 33837

Name and Title: Robert Downing, President
Address: 37534 Arch Lane #158
Zephyrhills, Florida 33541

Name and Title: Marion Davis, Secretary
Address: 357 Garman Avenue
Davenport, Florida 33837

Name and Title: Virginia Prezioso, Vice President
Address: 5351 Ixora Street
Zephyrhills, Florida 33541

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:

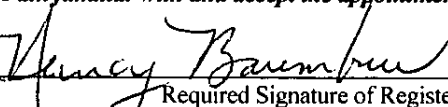
Name: Nancy Baumhover
Address: 36817 Palm Street
Dade City, Florida 33525

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Zephyrhills Senior Citizens Association of the Deaf, Inc
Address: C/o Marion Davis, Secretary
357 Garman Avenue
Davenport, Florida 33837

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

3 Jan 12
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

Jan 3, 2012
Date