

NI 2000004184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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J. Shivers APR 24 2012

## COVER LETTER

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

SUBJECT: CITRUS CHAOS 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: Michael Winship

Name (Printed or typed)

2018 S. Gleneagle Terr

Address

Lecanto, FL 34461

City, State & Zip

352-628-3991

Daytime Telephone number

winshima@tampabay.rr.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)

**ARTICLE I NAME**

The name of the corporation shall be: **CITRUS CHAOS INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
7299 S. Peach Pt.  
Homosassa, FL 34446

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To promote amateur national athletic competition and to support and develop amateur athletes in the sport of "Fastpitch Softball" within the guidelines of section 501(c)(3) of the Department of the Treasury, Internal Revenue Service. Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

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

Elected by Coaches and Parents of Team.

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

Name and Title: Bruce Kaufman, Board Chairman  
Address: 7299 S. Peach Pt  
Homosassa, FL 34446

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

Name and Title: Michael Winship, Board Member  
Address: 2018 S. Gleneagle Terr.  
Lecanto, FL 34461

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

Name and Title: Doug Mack, Board Member  
Address: 2368 S. Tennyson Pt.  
Homosassa, FL 34448

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: Bruce Kaufmann  
Address: 7299 Peach Pt.  
Homosassa, FL 34446

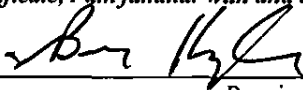
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Michael Winship  
Address: 2018 S. Gleneagle Terr  
Lecanto, FL 34461

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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

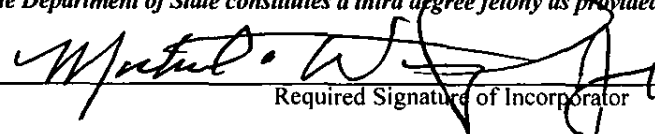


Required Signature of Registered Agent

3-29-12

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

3/29/12

Date