

N12000004481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

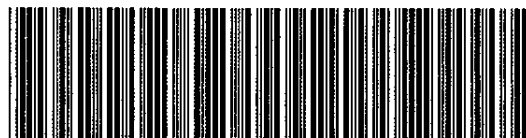
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100234322051

05/02/12--01023--007 **78.75

FILED
12 MAY -2 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
5/3/12

COVER LETTER

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

SUBJECT: Oasis High School Booster Club, 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: Oasis High School

Name (Printed or typed)

3507 Oasis Blvd.

Address

Cape Coral, FL 33914

City, State & Zip

239-541-1167

3507 Oasis Blvd. Telephone number

ohsboosters@capecharterschools.org

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

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:

Oasis High School Booster Club, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3507 Oasis Blvd.

Cape Coral, FL 33914

Mailing address, if different is:

3519 OASIS BLVD

CAPE CORAL, FL 33914

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the organization shall be to support the program and players both financially and spiritually. The primary concern will be the needs of the sports programs.

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

Each Board Member present in person shall be entitled to one vote. Elections shall be by nominations from the floor and a plurality of votes cast shall elect. All other matters shall be determined by a majority vote by members in person voting, unless otherwise provided by law and the by laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Louis J. Korchick, President

Address: 4411 SW 19th Place

Cape Coral, FL 33914

Name and Title: Angel Montoney, Secretary

Address: 2692 Bellingham Court

Cape Coral, FL 33991

Name and Title: Terri-Lynn Korchick, Vice President

Address: 4411 SW 19th Place

Cape Coral, FL 33914

Name and Title:

Address:

Name and Title: Larry Smith, Treasurer

Address: 3618 Agualinda Blvd

Cape Coral, FL 33914

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: Jason Bowman

Address: 1733 Savona Parkway W

Cape Coral, FL 33914

FILED
12 MAY -2 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Larry Smith

Address: 3618 Agualinda Blvd

Cape Coral, FL 33914

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

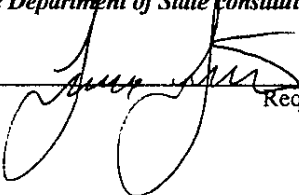


Required Signature of Registered Agent

3-19-12

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

4/30/12

Date