

N/1200000608/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

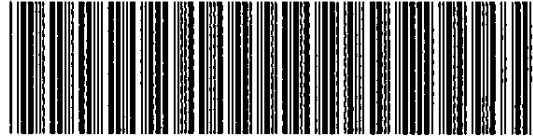
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 JUN 18 AM 9:33  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

K 06/20/12

## COVER LETTER

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

SUBJECT: UTBHOPDC COMMUNITY DEVELOPMENT CORPORATION  
(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: UTBHOPDC COMMUNITY DEVELOPMENT CORPORATION  
Name (Printed or typed)

5131 CULPEPPER PLACE  
Address

WESLEY CHAPEL FL 33544  
City, State & Zip

813-767-5050  
3410 EAST BAYVIEW DRIVE number

LOVEUKESHAWN@YAHOO.COM  
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:

**UTBHOPDC COMMUNITY DEVELOPMENT CORPORATION**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

3410 EAST HENRY AVENUE

TAMPA FLORIDA 33605

Mailing address, if different is:

5131 CULPEPPER PLACE

WESLEY CHAPEL FLORIDA 33544

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES.**

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

**AS PROVIDED FOR IN THE BY-LAWS**

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

Name and Title: NOEL FANNELL PRESIDENT

Address: 20137 OAK FLOWER DRIVE  
TAMPA FL 33647

Name and Title: BAMBI JONES ADMINISTRATOR

Address: 11724 132ND AVE  
LARGO FL 33778

Name and Title: DONALD ATKINS VICE PRESIDENT

Address: 1708 E 25TH AVE APT A  
TAMPA FL 33605

Name and Title: GREG WASHINGTON TREASURER

Address: 1147 MLK DRIVE  
LAKELAND FL33805

Name and Title: CORY WILLIAMS 2ND VICE PRESIDENT

Address: 8005 N 13TH ST  
TAMPA FL 33604

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: NOEL FANNELL

Address: 20137 OAK FLOWER DRIVE  
TAMPA FL 33647

**ARTICLE VII INCORPORATOR**

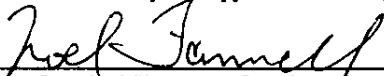
The name and address of the Incorporator is:

Name: NOEL FANNELL

Address: 20137 OAK FLOWER DRIVE  
TAMPA FL 33647

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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

06/12/2012

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

06/12/2012

Date