

N12000006487

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(City/State/Zip/Phone #)

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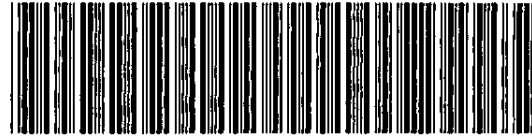
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

1 Burch JUL -2 2012

3 Burch JUL -2 2012

## COVER LETTER

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

SUBJECT: Oakland High School - Class of 1964, 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: Dolph Howard, III

Name (Printed or typed)

2713 Orchid Dr.

Address

Haines City, FL 33844

City, State & Zip

(863) 422-4882

2713 Orchid Dr. Telephone number

Dolphjr@aol.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:

Oakland High School - Class of 1964, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2713 Orchid Dr.

Haines City, FL 33844

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

SEE ATTACHMENT "A"

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

The method of selection of the Board of Directors and number of directors shall be stated in the bylaws.

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

Name and Title: Dolph Howard, III President & Board Chair

Address: 2713 Orchid Dr.

Haines City, FL 33844

Name and Title: Charlie M. Crews, Secretary & Director

Address: 603 Tangerine Dr.

Dundee, FL 33838

Name and Title: Johnny L. Lomax, Vice-President & Directors

Address: 4060 Vista Del Lago Dr.

Winter Haven, FL 33881-6802

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

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

Name and Title: Kathleen B. Thomas, Treasurer & Director

Address: PO Box 3404

Haines City, FL 33845

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: Dolph Howard, III

Address: 2713 Orchid Dr.

Haines City, FL 33844

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Dolph Howard, III

Address: 2713 Orchid Dr.

Haines City, FL 33844

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

Dolph Howard, III  
Required Signature of Registered Agent

6-28-2012  
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.

Dolph Howard, III  
Required Signature of Incorporator

6-28-2012  
Date

## Attachment "A"

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Name of Corporation:** Oakland High School – Class of 1964, Inc.

### **ARTICLE III PURPOSE:**

The organization is organized exclusively for charitable and educational purposes under section 501 © (3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

### **ARTICLE III DISSOLUTION:**

Upon the dissolution of this organization, the assets of the corporation shall be distributed exclusively for charitable and educational purposes to a similar Haines City based 501 © (3) exempt organization within the meaning of section 501 © (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.