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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: Ocala Christian Growth Center 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: Dr. Roger Ramage
Name (Printed or typed)

214 Locust Pass Loop
Address

Ocala, FL 34472
City, State & Zip

352-687-2411
Daytime Telephone number

ramages@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: Ocala Christian Growth Center Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
Ocala Christian Growth Center Inc.
7048 Midway Terrace, #101
Ocala, FL 34472

Mailing address, if different is:

Rev. Roger Ramage, Ed.D.
214 Locust Pass Loop
Ocala, FL 34472

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide Christian worship including praise, prayer, Bible study, sermons, study courses, testimonials, and the Christian sacraments of Baptism and Communion. The church is to be oriented to Christian commitment and discipleship growth.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: The pastor appointed the other 4 original members. These 5 comprised the Directors. A group vote of approval was conducted.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Roger Ramage - trustee in corp.
Address: Dr. Roger Ramage
214 Locust Pass Loop
Ocala, FL 34472

Name and Title: Fidel Pral - Assoc. Pastor, trustee, dir.
Address: Fidel Pral
8203 Fairways Circle, Apt. 6203
Ocala, FL 34472

Name and Title: Susan Ramage - trustee, secretary
Address: Susan Ramage (registered agent)
214 Locust Pass Loop
Ocala, FL 34472

Name and Title: Bontrice Pral - Treas., trustee, dir.
Address: Bontrice Pral
8203 Fairways Circle, Apt. 6203
Ocala, FL 34472

Name and Title: Heather Ramage trustee, Director
Address: Heather Ramage
5 Fir Trak Drive
Ocala, FL 34472

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: Susan Ramage
Address: Susan Ramage
214 Locust Pass Loop
Ocala, FL 34472

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dr. Roger Ramage
Address: Dr. Roger Ramage
214 Locust Pass Loop
Ocala, FL 34472

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

Susan Ramage
Required Signature of Registered Agent

8-30-12
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.

Dr. Roger Ramage
Required Signature of Incorporator

8-30-12
Date

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TALLAHASSEE, FLORIDA