

N12000009221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

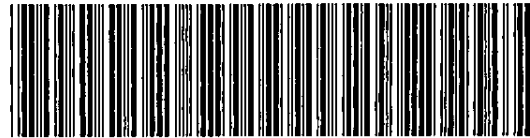
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/26/12--01002--009 **35.00

07/30/12--01030--019 **35.00

W12-40327

FILED
12 SEP 26 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 27 2012

COVER LETTER

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

SUBJECT: LIFESOURCE CHURCH, 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: SANDRA YORK
Name (Printed or typed)

4065 TAMIAMI TRAIL
Address

PORT CHARLOTTE, FL 33952
City, State & Zip

941-740-4030
4065 TAMIAMI TRAIL Telephone number

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

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2012

SANDRA YORK
4065 TAMiami TRAIL
PORT CHARLOTTE, FL 33952

SUBJECT: LIFESOURCE CHURCH, INC.
Ref. Number: W12000040327

Copy

We have received your document for LIFESOURCE CHURCH, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$35.00.

The articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of your document, along with copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 712A00020081

RECEIVED
12 SEP 24 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME LIFESOURCE CHURCH, INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
4065 TAMiami TRAIL
PORT CHARLOTTE, FL 33952

Mailing address, if different is:
P.O. BOX 6830
NORTH PORT, FL 34288

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO RECEIVE TITHS AND CONTRIBUTIONS AND PAY THEM OVER TO ORGANIZATIONS THAT ARE DESCRIBED IN SECTION 501(C)(3) AND EXEMPT FROM TAXATION UNDER SECTION 501 (A). THE ORGANIZATION MEETS THE ORGANIZATIONAL TEST

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

MAJORITY VOTE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KENNETH N. YORK, DIRECTOR
Address: 17221 MALTA AVE
PORT CHARLOTTE, FL 33954

Name and Title: GARY LOFTEN, FINANCIAL DIRECTOR
Address: 23374 MACDOUGALL AVE
PORT CHARLOTTE, FL 33980

Name and Title: SANDRA YORK, ADMIN. DIRECTOR
Address: 17221 MALTA AVE
PORT CHARLOTTE, FL 33954

Name and Title: BRANDI WALKER, DIRECTOR
Address: 4274 TROOST ST
N. PORT, FL 34288

Name and Title: STEVE WALKER, DIRECTOR
Address: 4274 TROOST ST
N. PORT, FL 34288

Name and Title: TINA LOFTEN, DIRECTOR
Address: 23374 MACDOUGALL AVE
PORT CHARLOTTE, FL 33980

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

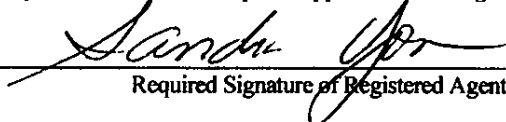
Name: SANDRA YORK
Address: 17221 MALTA AVE
PORT CHARLOTTE, FL 33954

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

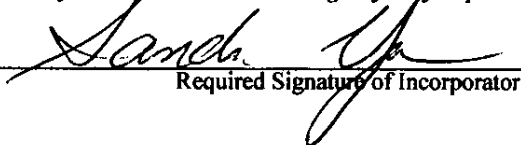
Name: SANDRA YORK
Address: 17221 MALTA AVE
PORT CHARLOTTE, FL 33954

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

9-17-12
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

9-17-12
Date

FILED
12 SEP 26 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA