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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 NOV 30 AM 10:12

FILED

J. Shivers DEC 03 2012

COVER LETTER

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

SUBJECT: Chipola Deland Commercial Center Property Owners Association, 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: Leigh A. Williams
Name (Printed or typed)
1031 W. Morse Blvd., Suite 350
Address
Winter Park, FL 32789
City, State & Zip
407-647-2777
Daytime Telephone number

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: CHIPOLA DELAND COMMERCIAL CENTER PROPERTY OWNERS ASSOCIATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8998 GLADIN COURT
ORLANDO, FL 32819

Mailing address, if different is:
8998 GLADIN COURT
ORLANDO, FL 32819

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation is to act as the POA for Chipola Deland Commercial Center. The Corporation shall exercise all powers necessary or convenient to conduct, promotion or attainment of the business or purposes otherwise set forth herein.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: ANNUALLY BY THE BOARD OF DIRECTORS - BY LAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSEPH SCHUEMANN - PRESIDENT AND SECRETARY
Address: 8998 GLADIN COURT
ORLANDO, FL 32819

Name and Title: _____

Address: _____

Name and Title: THEODORE SCHEMANN - VICE PRESIDENT AND TREASURER
Address: 8998 GLADIN COURT
ORLANDO, FL 32819

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

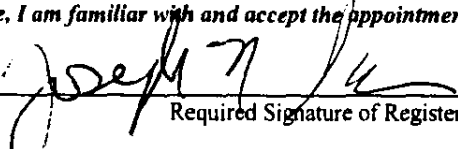
Name: JOSEPH SCHUEMANN
Address: 8998 GLADIN COURT
ORLANDO, FL 32819

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

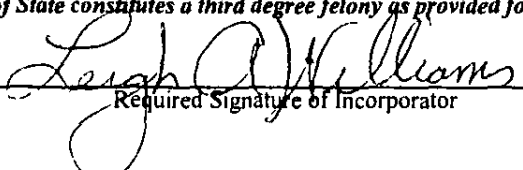
Name: LEIGH A. WILLIAMS
Address: 1031 W. MORSE BLVD., SUITE 350
WINTER PARK, FL 32789

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

11-28-12
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

11-28-12
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA