

N13000004864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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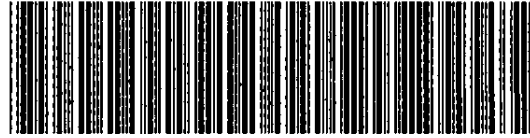
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
5/28/13

COVER LETTER

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

SUBJECT: Cocoa Tigers Youth Football & Cheerleading 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: Debra Robinson
Name (Printed or typed)

414 Dryden Circle
Address

Cocoa, FL 32926
City, State & Zip

321-961-4578
Daytime Telephone number

dchicrul@aol.com
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

May 8, 2013

DEBRA ROBINSON
414 DRYDEN CIRCLE
COCOA, FL 32926

SUBJECT: COCOA TIGERS YOUTH FOOTBALL & CHEERLEADING
ASSOCIATION, INC.
Ref. Number: W13000027220

We have received your document for COCOA TIGERS YOUTH FOOTBALL & CHEERLEADING ASSOCIATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

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 a 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.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 313A00011357

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

ARTICLE I NAME

The name of the corporation shall be: Cocoa Tigers Youth Football & Cheerleading Association, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1881 Rosetine Street
Cocoa, FL 32926

Mailing address, if different is:
P.O. Box 604
Cocoa, FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The primary purpose is to provide all participants with the fundamentals of football or cheerleading and to provide a supervised, organized and safe opportunity to play the game free from interference of adult competition. To inspire youth to participate in an atmosphere that teaches and encourages the ideals of good sportsmanship, fair competition, self confidence and the importance of physical fitness.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Board of Directors
are nominated and elected by quorum vote of the Board members and General Board members.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Todd Bamford, P
Address: 1040 Noreen Blvd
Rockledge, FL 32955

Name and Title: Ramon Kameka, VP
Address: 1600 Woodland Dr. E111
Rockledge, FL 32955

Name and Title: Evie Bednarcik, O
Address: P.O. Box 138
Cape Canaveral, FL 32920

Name and Title: Mallory Boudreau, T
Address: 248 Macon Drive
Titusville, FL 32780

Name and Title: Debra Robinson, O
Address: 414 Dryden Circle
Cocoa, FL 32926

Name and Title: _____
Address: _____

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13 MAY 22 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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13 MAY 22 AM 10: 19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Debra Robinson

Address: 414 Dryden Circle
Cocoa, FL 32926

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Debra Robinson

Address: 414 Dryden Circle
Cocoa, FL 32926

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

Debra Robinson
Required Signature of Registered Agent

5/13/13
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.

Debra Robinson
Required Signature of Incorporator

5/13/13
Date