

N/130000007984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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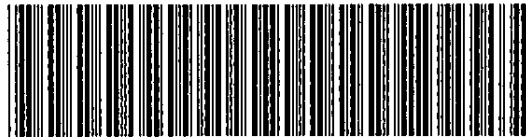
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 SEP -3 PM 2:32

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MRD
9/6/13

COVER LETTER

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

SUBJECT: The Progressive Mahogany Women's Club, 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: Gussie M. Boatwright
Name (Printed or typed)

891 NE 200th Ave
Address

Williston, FL 32696
City, State & Zip

352-246-8580
Daytime Telephone number

gboatwright1@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: The Progressive Mahogany Women's Club, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
131 North Main Street Williston, FL 32696

Mailing address, if different is:
P. O. Box ~~810~~ Williston, FL 32696
801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To promote charitable endeavors, cultural improvements
civic pride and unity with our community.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Annually by secret
ballot. Names are submitted through the nominating committee

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gladys Days, President
Address: 21330 Ne 37th Place
Williston, FL 32696

Name and Title: Mrs. Freddie Mae Crawford- Treasurer
Address: P. O. box 244
Williston, FL 32696

Name and Title: Gussie M. Boatwright-1st VP
Address: 891 NE 200th Ave
Williston, FL 32696

Name and Title: Dolores Williams, 3rdVP-Financial Secretary
Address: 20531 Ne 40th Pl
Williston, FL 32696

Name and Title: Wendy Coleman -2nd VP
Address: 5290 NE 144th Ave
Williston, FL 32696

Name and Title: _____
Address: _____

FILED
13 SEP - 3 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED

13 SEP -3 PM 2:32

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: Gladys Days

Address: 21330 NE 37th Place

Williston, FL 32696

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gussie M. Boatwright

Address: 891 NE 200th Ave

Williston, FL 32696

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

Gladys Days

Required Signature of Registered Agent

8/26/2013

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.

Gussie M. Boatwright

Required Signature of Incorporator

8/30/2013

Date