

N13000009078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

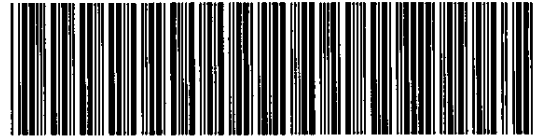
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/04/13--01018--003 \*\*70.00

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13 OCT -4 PM 2:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD  
10/7/13

## COVER LETTER

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

SUBJECT: **Weeki Wachee Community Radio, 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: **Daniel M. Phillips**

Name (Printed or typed)

**13003 Motmot Road**

Address

**Weeki Wachee, FL 34614**

City, State & Zip

**(352) 678-1802**

Daytime Telephone number

**wwcr@outlook.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)

**FILED**

**ARTICLE I    NAME**

The name of the corporation shall be: Weeki Wachee Community Radio, Inc. 13 OCT -4 PM 2: 04

**ARTICLE II    PRINCIPAL OFFICE**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal street address:  
11240 Commercial Way

Mailing address, if different is:  
P.O. Box 10196

Weeki Wachee, FL 34614

Brooksville, FL 34603-0196

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: 1. To provide religious instruction and moral teaching.

2. To provide opportunity for and to promote discussion of all areas of family,  
contemporary, social, religious and personal life issues.

3. To teach the ideals of citizenship, integrity, personal responsibility and  
spiritual maturity.

**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: Daniel M. Phillips/President

Address: 13003 Motmot Road  
Weeki Wachee, FL 34614

Name and Title: Patricia A. Phillips/Vice President

Address: 13003 Motmot Road  
Weeki Wachee, FL 34614

Name and Title: Harley J. Cutlip/Director

Address: 26127 Lambeth Road  
Brooksville, FL 34601

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

FILED

13 OCT -4 PM 2: 04

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: Daniel M. Phillips

Address: 13003 Motmot Road  
Weeki Wachee, FL 34614

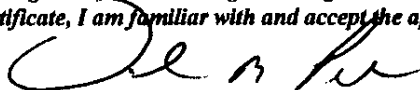
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Patricia A. Phillips

Address: 13003 Motmot Road  
Weeki Wachee, FL 34614

*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*

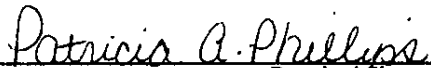


Required Signature of Registered Agent

9/27/2013

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.*



Required Signature of Incorporator

9/27/2013

Date