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SECRETARY OF STATE
MALLAHASSEF FLORINA

MRD 11/4/13

COVER LETTER

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

SUBJECT: Southwest Florida Fossil Society, 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:	Kathy Caldwell
	Name (Printed or typed)

1540 Schenley St.

Port Charlotte, FL 33981

City, State & Zip

Daytime Telephone number

blondie1638@comcast.net

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 compliance with Chapter 617, F.S., (Not for Profit)

in compliance with	Chapter of 7, r.s	s., (Not for Profit)			
ARTICLE I NAME The name of the corporation shall be: Southwest Florida Fossil Society, Inc.					
ARTICLE II PRINCIPAL OFFICE Principal street address: 1540 Schenley St.		Mailing address, if different is:	FILED		
Port Charlotte, FL 33981		10-7-	7.9		
ARTICLE III PURPOSE The purpose for which the corporation is organized is: religious, educational, and scientific pure of distributions to a reprinctions that small	poses, incl	uding, for such purposes, t	he making		
of distributions to organizations that quali					
of the Internal Revenue Code, or the cor					
Specifically, the purpose of the corporation Paleontology through the collection, ide	· · ·				
providing a regional forum for education					
		A Secretary of the Control of the Co	Zitino nola.		
ARTICLE IV MANNER OF ELECTION The manner of the Corporation of the Cor		directors are elected and appointed:			
ARTICLE V INITIAL OFFICERS AND/OR DIF			-		
Name and Title: Charles Ferrara, Pres./Dir.	Name and Title:	Michael Kozlowski, Tres./Dir.			
Address 2139 Park Road	Address:	1024 NE 4th Street			
Venice, FL 34293		Cape Coral, FL 33909			
Name and Title: James Davis, Vice Pres./Dir.	Name and Title	Jay Lev, Dir.			
Address 2328 Appaloosa Cir.	Address:	1000 Islamorada Blvd.			
Sarasota, FL 34240		Punta Gorda, FL 33955			
Name and Title: Kathy Caldwell, Sec./Dir.	Name and Title	Scott Tucker, Dir.			
Address 1540 Schenley St.	Address:	24263 San Citrian			
	 .				

Punta Gorda, FL 33955

Port Charlotte, FL 33981

Nome and Title	CAY SMall, Dir Name and Title	Down Marco Wilson 7	1105 U.L
Address	5864 Swaying Palm Address:	P.O. Box 130	_
Vadiess	onta gorda, FL	Arcadia, FL	
#	33982	34266	
_			<u> </u>
Name and Title:	STEVEN STRICK, DIE Name and Title		
Address 3	439 Montgomery DR. Address:		
-	Port Chalotte, FL		
_	3 3981		
			•
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the regi	stered agent is:	
Name:	Kathy Caldwell		<u>م</u> د
Address:	1540 Schenley St.	SECRI	三 川
Addiess.	Port Charlotte, FL 33981	HIS COLUMN TO THE COLUMN TO TH	
		SEE,	P
ARTICLE VII	INCORPORATOR tress of the Incorporator is:		
Name:	Kathy Caldwell		# 9 9
Address:	1540 Schenley St.		
Address.	Port Charlotte, FL 33981		
	<u>'</u>		
	ed as registered agent to accept service of process for the miliar with and accept the appointment as registered agen		lace designated in this
Kathal (Collwell	October	21, 2013
1001	Required Signature of Registered Agent	D	ate
	ment and affirm that the facts stated herein are true. I am of State constitutes a third degree felony as provided for in		bmitted in a document
Kathy	Caldwell	October	21, 2013
	Required Signature of Incorporator	I	Date

.... <u>-</u> ...