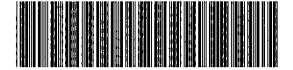
## NHOCOOD 890

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
	- AN	
(Do	ocument Number)	
Certified Copies	Certificates	of Status
	_	
Special Instructions to	Filing Officer:	
·		

Office Use Only



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HAVISION OF CORPORATION



JAMES FISHER 6380 RADIO ROAD #70 NAPLES, FL 34104

Request taken by: cgolden 12-09-2013

The forms you recently requested from this office are:

- (1) 101. N/P Articles
- (1) 502. 617 N/P booklet

Should you have any questions or need any further information, please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

## **COVER LETTER**

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

SUBJECT: NAPLES MEMORIAL VFW POST 7369 MEN'S AUXILIARY INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

FROM: JAMES	H. FISHER Name (Printed or typed)
2727	Bayshore Dr. Unit #108
Naples	S, Florida 34112 City, State & Zip
(239	Daytime Telephone number
NONE 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: NAPLES MEMORIAL POST 7369 MEN'S AUXILIARY, INC.

ARTICLE II	PRINCIPAL OF	TCE

	Principal street address:		Mailing address, if different is:		Œ
	-2727 Bayshore Drive. U	nit 108			200
	Naples, FL 34112			JAN	SEC.
	TAPTEST IN SHITE		······································	<del>را</del> 2	95
		· · · · · · · · · · · · · · · · · · ·			<u> </u>
ARTICLE				2	REDRING.
The purpos	se for which the corporation is organized is:	an Auxil	iary of Naples Memorial	VFW	
Post	7369 which is a Florida	not-for	-Profit organization	0	9
<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>		<del></del>	
					· · · · · · · · · · · · · · · · · · ·
ARTICLE	IV MANNER OF ELECTION The	manner in which	h the directors are elected and appointed:		
	1 nomination and electio				
	TOMINGOION GIR GIOGOIO	, <u>,</u>		-	
ARTICLE	E V INITIAL OFFICERS AND/OR I	DIRECTORS			
Name and 1	Title: <u>ROGER FRITCHEY(Presi</u>	<u>d</u> e <b>Natab</b> e and T	itle: SHANE LAWLER (Senior	Vice	<u> </u>
Address	2727 Bayshore Drive	Address:	2727 Bayshore Dr.		
	Unit 108	- <del></del>	Unit 108		
	Naples, FL 34112	<u> </u>	Naples, FL 34112		
Name and T	Title:_RICHARD_HAINES_(Jr.Vi	— ∈eName and T	illejohn MADSON (CHAPLAIN)		
Address	2727 Bayshore Dr.	•			
	Unit 108	. <u></u>	Unit 108		
	-Naples, FL 34112	<del></del>	Naples, FL 34112		
Name and 1	Title: EDWARD SWANK(Secretar	Y)Name and T	itle:JAMES H. FISHER (Treas	urer	)
Address	2727 Bayshore Drive	Address:	2727 Bayshore Dr.		
	Unit 108	<del></del>	Unit 108		
	Naples, FL 34112	_	Naples, FL 34112		

Name and Title:	DOUGLAS FLEISSNER	Name and Title	SVICTOR S. SMOCK (2 YR TE	RUSTEE)
Address	2727 Bayshore Dr.	Address:	2727 BAYSHORE DR.	
<del></del>	UNIT (108)	-	UNIT (108)	
-	NAPLES, FL 34112	•	NAPLES, FL 34112	
Name and Title:	ISAAC PERSLEY (	TEE) Name and Title:		
Address _	2727 Bayshore Dr.	Address:		
****	UNIT 108			
_	NAPLES, FL #\$!!@		· · · · · · · · · · · · · · · · · · ·	
ARTICLE VI	REGISTERED AGENT  orida street address (P.O. Box NOT acce	ptable) of the regis	stered agent is:	
Name:	JAMES H. FISHER			
Address:	2727 BAYSHORE DR.			
	UNIT 108 NAPLES, FL 34112	<del></del>		
	INCORPORATOR  Idress of the Incorporator is:			
Name:	EDWARD SWANK			
Address:	2727 BAYSHORE DR. UNIT 108 NAPLES, FL 34112			
	amiliar with and accept the appointment a		above stated corporation at the place designate and agree to act in this capacity	ed in this
	Required Signature of Registered		1-17-14	
	V Required Signature of Registered	Agent	Date	
	ument and affirm that the facts stated here it of State constitutes a third degree felony i		aware that any false information submitted in a d s.817.155, F.S.	locument
-	Educate & Swain	R	1/17/14	
	Kequired Signature of Incorp	porator	Date	