

N/A 0000002628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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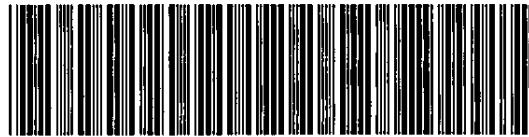
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE FLORIDA

## COVER LETTER

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

**SUBJECT:** Kissimmee Valley Beekeepers 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: William B Denman Jr.

Name (Printed or typed)

3310 Steeplechase Lane

Address

Kissimmee, FL 34746

City, State & Zip

(407) 742-2530

Daytime Telephone number

jr3310@gmail.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: Kissimmee Valley Beekeepers Association inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
3310 Steeplechase Lane

Kissimmee, FL 34746

Mailing address, if different is:

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

The promotion and furtherance of modern and up-to-date beekeeping.

To Act in the interest of beekeepers in protection and conduction beekeeping affairs.

To act as an instrument for, and an aid in cooperative and mutual beekeeping methods

To act as a representative of the Kissimmee Valley Beekeepers Association in both state and  
national beekeeping matters.

**ARTICLE IV    MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

Annual Election

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: William B Denman, President

Address    3310 Steeplechase Lane  
Kissimmee, Fl 34746

Name and Title: Jason Deeringer, Vice President

Address:    636 Avenue B Northeast  
Winterhaven, FL 33881

Name and Title: Jessica Sullivan, Secretary

Address    1921 Kissimmee Valley Lane,  
Kissimmee, FL 34744

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

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

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

Address \_\_\_\_\_

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

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

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TALLAHASSEE FLORIDA  
SECRETARY OF STATE

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

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

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

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: William B Denman Jr.

Address: 3310 Steeplechase Lane  
Kissimmee, FL 34746


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: William B Denman Jr.

Address: 3310 Steeplechase Lane  
Kissimmee, FL 34746

*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

3-5-2014

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

3-5-2014

Date

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