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

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SUBJECT: Summertree Friendship Club, Inc.

Enclosed is an original and one (1) copy of the Aricles of Incorporation and a check in the amount of \$87.50 for the Filing Fee, a Certified Copy and a Certificate.

From: Harold Roberts

11149 Clear Oak Circle

New Port Richey, FL. 34654

727 857 2590

ARTICLES OF INCORPORATION

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

ARTICLE 1 NAME

The name of the corporation shall be:

Summertree Friendship Club, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street and mailing address:

12005 Paradise Point Way New Port Richey, Fl. 34654

ARTICLE III PURPOSE

The purpose for which the corporation is organized as a social, charitable and educational organization to benefit the residents of the Summertree community and to provide charitable giving to those in need in the surrounding communities. To provide personal connection and communication to the residents of our community.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected: Two of the four directors are elected by the membership each on an annual basis. Each director holds office for two years on an alternate year basis.

SECRETARY OF STATE
DIVISION SE CORPORATIONS

14 APR -3 AM D: 12

ARTICLE V INITIAL OFFICERS/DIRECTORS

Name/Title: Harold Roberts, President

11149 Clear Creek Circle

New Port Richey FL 34654

Name/Title: Peter Lucatuorto, Vice-President

11531 Pear Tree Drive

New Port Richet Fl 34654

Name/Title: Ron Koons, Treasurer

11616 Pear Tree Drive

New Port Richey FL 34654

Name/Title: Paul Leoci, Secretary

11236 Clear Oak Circle

New Port Richey FL 34654

ARTICLE VI REGISTERED AGENT

The name and address of the Registered Agent

Dan Schramm, President

1107 Key Plaza, 306

Key West Fl 33040-4077

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Donald M Kelly

11609 Pear Tree Drive

New Port Richey Fl 34654

Having been named registered agent to accept the 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 and agree to act in this capacity.

Required signature of Registered Agent Blue Renet Offices, The Date

I submit this document and affirm that the facts stated in here 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

Date