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DIVISION OF CORPORATIONS
14 APR - 7 PM 3: 21

COVER LETTER

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

SUBJECT: Old Spring Lake Community Center, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Christine Fellner
Name (Printed or typed)

6265 Neff Lake Road
Address

Brooksville, Fl. 34601
City, State & Zip

352 754 1803
Daytime Telephone number

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

ARTICLE I NAME

The name of the corporation shall be: Old Spring Lake Community Center, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4184 Spring Lake Highway
Brooksville
Florida 34601

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A social club dedicated to the preservation and improvement of the historical building which was placed on the National Registry of Historical Sites 20 October 2009. The Old Spring Lake Community, Inc. meets monthly in the building as well as helps to promote other community activities.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: _____

Officers and Board members are elected by majority vote according to Roberts Rules of Order, Revised Edition.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christine Fellner, President
Address: 6265 Neff Lake Rd.
Brookville, Fl. 34601

Name and Title: Steve Fellner, Treasurer
Address: 6265 Neff Lake Rd.
Brooksville, Fl. 34601

Name and Title: Jaime Hendry, V. President
Address: 27212 Hickory Hill Rd.
Brooksville, Fl. 34602

Name and Title: Al Hernandez, Director
Address: 26075 Halsey Rd.
Brooksville, Fl. 34601

Name and Title: Judy Cropper, Secretary
Address: 3437 Majestic Oak Lane
Brooksville, Fl. 34602

Name and Title: Jim Anderson, Director
Address: 12151 Cavern Rd.
Spring Hill, Fl. 34609

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Name and Title: Sharlene Coburn Name and Title: _____

Address: 25525 Halsey Rd. Address: _____
Brooksville, Fl. 34601 _____

Name and Title: George Lee, Director Name and Title: _____

Address: 5025 Spring Lake Highway Address: _____
Brooksville, Fl. 34601 _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Christine Fellner

Address: 6265 Neff Lake Rd.
Brooksville, Fl. 34601

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Al Hernandez

Address: 26075 Halsey Rd.
Brooksville, Fl. 34601

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

Christine Fellner
Required Signature of Registered Agent

4-4-14
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.

Al Hernandez
Required Signature of Incorporator

4-4-14
Date

AL HERNANDEZ

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