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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

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

**SUBJECT:** North East Polk Arts 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:** John L. Wood  
Name (Printed or typed)

2983 Sequoyah Drive  
Address

Haines City, FL 33844  
City, State & Zip

863-438-6221  
Daytime Telephone number

nepolkartsassociation@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: North East Polk Arts Association, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
2983 Sequoyah Drive

Mailing address, if different is:  
Haines City, FL 33844

**ARTICLE III    PURPOSE**

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

The corporation known as the North East Polk Arts Association, Inc. will serve, advance, and lead an environment that promotes the arts through economic development, sustainability, education, cultural heritage and support of the Arts in North East Polk County, Florida. This corporation is organized and shall be operated exclusively within the meaning of the Internal Revenue Code §501(c)(3).

**ARTICLE IV    MANNER OF ELECTION**

The manner in which the directors are elected and appointed: \_\_\_\_\_  
Officers and Directors were elected by majority vote at full Board Meeting.

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

Name and Title: Matina Wagner, President

Address: 123 Loma Bonita Drive  
Davenport, FL 33837

Name and Title: Amy Arrington, Vice President

Address: 160 Whispering Pines Way  
Davenport, FL 33837

Name and Title: Paul W. Gerrard, Jr, Treasurer

Address: 540 Greenway Dr.  
Lake Wales, FL 33898

Name and Title: Allison Beeman, Secretary

Address: 124 Lake Otis Road  
Winter Haven fl 33884

Name and Title: Jenna Emerson, Member

Address: 100 Lem Carnes Road  
Davenport, FL. 33837

Name and Title: Matt Lukens, Member

Address: 128 Lake Morton Drive  
Lakeland, FL 33801

Name and Title: Dave Smith, Member

Address: 105 Ariana Ave.  
Auburndale, FL 33823

Name and Title: Jonathan Evans, Member

Address: 1372 Rebecca Drive  
Haines City, FL 33844

Name and Title: John L. Wood, Executive Director

Address: 2983 Sequoyah Drive  
Haines City, FL 33844

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: Kevin A. Ashley  
Address: 199 Avenue B, N.W. Suite 200  
Winter Haven, FL 33881

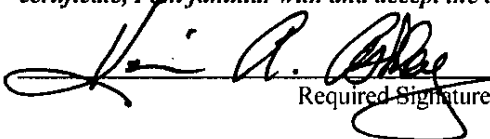
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: John L. Wood  
Address: 2983 Sequoyah Dr.  
Haines City, FL 33844

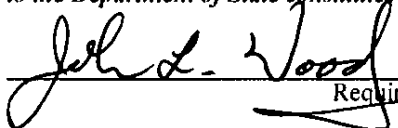
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature of Registered Agent

July 29, 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

July 29, 2014

Date