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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: Faith Alternative Juvenile Program, 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: Chris Davis  
Name (Printed or typed)  
2029 Bonita Way South  
Address  
St. Petersburg, FL 33712  
City, State & Zip  
(727) 452-9613  
Daytime Telephone number  
davfoto@aol.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: Faith Alternative Juvenile Program, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
2029 Bonita Way South  
St. Ptersburg  
FL, 33712

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Faith Alternative Juvenile Program, Inc.'s  
mission is to transform the lives of juvenile offenders by giving them the tools  
and opportunities necessary to learn and develop into self-sufficient adults who  
will become productive members of society; and reducing the incarceration  
of youths in our communities.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: as set  
forth in the bylaws.

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

Name and Title: Tim Krout, President, Director  
Address: 6100 12th ST S., Apt 223  
St. Petersburg, FL 32712

Name and Title: Tammie Williams, Secretary, Director  
Address: 6825 16th Way S.  
St. Petersburg, FL 33705

Name and Title: Jay Cave. Vice-Pres, Director  
Address: 2001 62nd Ave. S.  
St. Petersburg, FL 32712

Name and Title: Godfrey Watson, Board Member, Director  
Address: 1549 84th Ave. N.  
St. Petersburg, FL 33702

Name and Title: Delores Scott, Treasurer, Director  
Address: 3242 San Pedro ST  
Clearwater, FL 33759

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

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TALLAHASSEE, FLORIDA

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: Beverly Burnett  
Address: 2029 Bonita Way South  
St. Petersburg, FL 33712

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Beverly Burnett  
Address: 2029 Bonita Way South  
St. Petersburg, FL 33712

*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

8/19/2014  
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

8/19/2014  
Date