

N/500000/505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

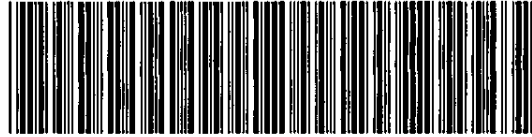
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 FEB - 6 PM 4:26

02/12/15

COVER LETTER

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

SUBJECT: Tampa Community Sports, 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: Duane K Jones
Name (Printed or typed)

10405 Willowbrae Dr
Address

Tampa, FL 33624
City, State & Zip

(813) 943-3633
Daytime Telephone number

duane_dj@hotmail.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: **Tampa Community Sports, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

10405 Willowbrae Dr.

Tampa, FL 33624

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The mission of the Tampa Community Sports, Inc. is to provide social, recreational and educational programs to its member teams and the residents of the State of Florida. The corporation also hopes to achieve self-awareness and personal growth aiding in community pride, cohesiveness and decrease prevalent problems in the local and surrounding community such as juvenile crime, teen pregnancy and drug activity. The primary objective and purpose of this corporation shall be: To provide a safe haven for all youth and give them an alternative to the streets through the implementation of a mentor and youth athletic program. To adhere to all, Florida Statutes (F.S.) while conducting any and all lawful business as a not for profit corporation in the state of Florida.

ARTICLE IV INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Duane K. Jones – President**

Address: **10405 Willowbrae Dr.
Tampa, FL 33624**

Name and Title: **Rosalind L. Jones - Treasurer**

Address: **10405 Willowbrae Dr.
Tampa, FL 33624**

Name and Title: **Andrea L. Mitchell - Secretary**

Address: **308 Woodlawn Ave
Tampa, FL 33603**

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ARTICLE V REGISTERED AGENT

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

Name: **Duane K. Jones**
Address: **10405 Willowbrae Dr.**
Tampa, FL 33624

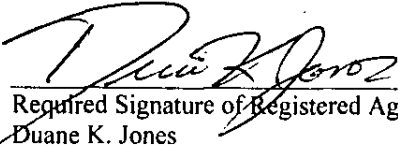
ARTICLE VI INCORPORATOR

The name and address of the Incorporator is:

Name: **Duane K. Jones**
Address: **10405 Willowbrae Dr.**
Tampa, FL 33624

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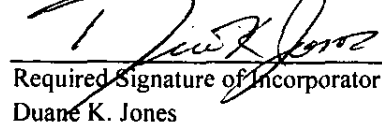
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent
Duane K. Jones

FEB 3, 2015
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
Duane K. Jones

FEB 3, 2015
Date