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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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3/19/15

COVER LETTER

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

SUBJECT: Suncoast NEA-Retired 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: Martha Karlovetz
Name (Printed or typed)

1834 Flametree Lane
Address

Venice, FL 34293
City, State & Zip

941-492-4173 or 314-795-2934
Daytime Telephone
number

Marthalake@aol.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 6, 2015

MARTHA KARLOVETZ
1834 FLAMETREE LANE
VENICE, FL 34293

SUBJECT: SUNCOAST NEA-RETIRED ASSOCIATION, INC.
Ref. Number: W15000016329

We have received your document for SUNCOAST NEA-RETIRED ASSOCIATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carol Mustain
Regulatory Specialist II

Letter Number: 015A00004681

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

ARTICLE I NAME

The name of the corporation shall be: Suncoast NEA-Retired Association, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address:
1834 Flametree Lane, Venice, FL 34293

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

- A) To provide opportunities for SCNEA-Retired members to address and pursue issues of common concern and to provide forums for information sharing and social interaction.
- B) To provide positive support for public education.
- C) To involve members in the election of pro-education candidates to public office and to lobby for public education and for the protection of retirement benefits.
- D) To build camaraderie among retired educational employees.
- E) To promote service to our schools and community-based organizations.

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____

- A) Election of Officers
- 1) Nominations and elections shall take place at the first meeting of each year.
 - 2) Individuals may self-nominate or be nominated from the floor.
 - 3) Elections shall be by secret ballot except those candidates without opposition may be declared elected by acclamation.
- B) Terms of Office
- 1) SCNEA-Retired officers will assume that office at the end of the meeting in which they were elected.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Martha Karlovetz, President

Name and Title: Paul Schatz, Vice President

Address 1834 Flametree Lane, Venice, FL 34293

Address: 8325 Canary Palm Ct., Sarasota, FL, 34238

Name and Title: Francine Schatz, Secretary

Name and Title: LeRoy Hasselbring, Treasurer

Address 8325 Canary Palm Ct., Sarasota, FL 34238

Address: 3614 Walden Pond Dr., Sarasota, FL 34240

Name and Title: Mary Hasselbring, Membership Chair

Name and Title: Frank Walsh, Member-at-large

Address 3614 Walden Pond Dr., Sarasota, FL 34238

Address: 214 Lake Victoria Ct., Englewood, FL 34223

ARTICLE VI REGISTERED AGENT

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

Name:

Leroy Hasselbring

Address:

3614 Walden Pond Dr.

Sarasota, FL 34240

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Martha Karlovetz

Address:

834 Flametree Lane

Venice, FL 34293

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

Leroy Hasselbring

Required Signature of Registered Agent

2/27/2015

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.

Martha Karlovetz

Required Signature of Incorporator

2/26/15

Date