

N 150000023975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

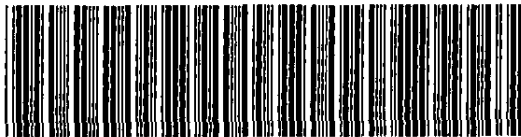
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500271697595

04/13/15--01032--006 **70.00

FILED

15 APR 13 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13
4/21/15

COVER LETTER

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

SUBJECT: COCONUT PALMS COMMUNITY 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: GWENDOLYN DICKSON
Name (Printed or typed)

12329 SW 249 STREET
Address

HOMESTEAD, FL 33032
City, State & Zip

(305) 281-0397
Daytime Telephone number

Chiefdickson @ ATT.NET
E-mail address: (to be used for future annual report notification)

FILED
15 APR 13 AM 8:17
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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: COCONUT PALMS COMMUNITY INC

FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address:

12412 SW 250 Ter.
HOMESTEAD, FL 33032

Mailing address, if different is: SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 APR 13 AM 8:17

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO ESTABLISH AND MAINTAIN A
STABILIZED COMMUNITY BY ASSISTING IN PROTECTING THE SAFETY
OF INDIVIDUALS THROUGH OUR CRIME WATCH AFFILIATION.
TO MAINTAIN A LAWN SERVICE FOR THE COMMUNITY AND
THE UPGRADE (PAINTING) OF THE WALK SURROUNDING OUR
DEVELOPMENT TO ENSURE THE PROPERTY VALUE OF OUR HOMES.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: FIRST
MEETING OF THE YEAR BY A 51% MAJORITY OF MEMBERSHIP

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jacqueline Rivera - PRESIDENT Name and Title: _____

Address: 12412 SW 250 Ter. Address: _____
HOMESTEAD, FL 33032

Name and Title: PAULSHANCE DAVIS - SECRETARY Name and Title: _____

Address: 12302 SW 122 CT. Address: _____
HOMESTEAD, FL 33032

Name and Title: FRANK PEDINSKI - TREASURER Name and Title: _____

Address: 25006 SW 122 CT. Address: _____
HOMESTEAD, FL 33032

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Jacquelin Rivera

Address: 12492 SW 250 Terrace
HOMESTERS, FL 33032

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gwendolyn G. Dickson

Address: 12329 SW 249 St.
HOMESTEAD, FL 33032

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

Jacquelin Rivera
Required Signature of Registered Agent

7 April 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.

Gwendolyn G. Dickson
Required Signature of Incorporator

4-7-15
Date

FILED
15 APR 13 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA