

N150000008911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

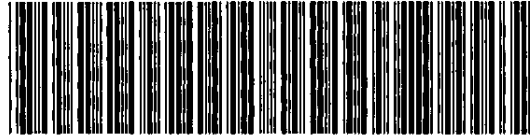
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SEC. OF STATE  
BALTIMORE, MD

MD 9/17

## COVER LETTER

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

**SUBJECT:** HIGHWAY CHRISTIAN CHURCH OF GOD OF THE APOSTOLIC FAITH, 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:** CLAUDETTE STEVENSON  
\_\_\_\_\_  
Name (Printed or typed)

14115 S. E. 38th TERRACE  
\_\_\_\_\_  
Address

SUMMERFIELD, FLORIDA 34491  
\_\_\_\_\_  
City, State & Zip

352-274-0689  
\_\_\_\_\_  
Daytime Telephone number

highwaylove8@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: HIGHWAY CHRISTIAN CHURCH OF GOD OF THE APOSTOLIC FAITH, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
104 S. W. 20TH AVENUE

OCALA, FLORIDA 34471

Mailing address, if different is:  
P.O. BOX 6787

OCALA, FLORIDA 34478

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CLERK

**ARTICLE III PURPOSE**

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

The specific and primary purpose for which this corporation is organized is for Religious,

Charitable, Scientific, Literary, and Educational purposes that will qualify exclusively

as a non-profit tax exempt organization under Section 501(c)(3) of the Internal Revenue Code.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: Based on Bylaws

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

Name and Title:	<u>Claudette Stevenson-Pastor</u>	Name and Title:	<u>Desirae Williams-Treasurer</u>
Address	<u>14115 S.E.38th Terrace</u>	Address:	<u>2647 S.W. 3rd Avenue</u>
	<u>Summerfield, Florida 34491</u>		<u>Ocala, Florida 34474</u>

Name and Title:	<u>Mary J. Oliver-Overseer</u>	Name and Title:	_____
Address	<u>2501 S.W. 10th Street</u>	Address:	_____
	<u>Ocala, Florida</u>		_____

Name and Title:	<u>Regenia Jefferies-Secretary</u>	Name and Title:	_____
Address	<u>20401 W. McKinney Avenue</u>	Address:	_____
	<u>Dunnellon, Florida 34431</u>		_____

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: Claudette Stevenson

Address: 14115 S.E. 38th Terrace

Summerfield, Florida 34491

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Claudette Stevenson

Address: 14115 S.E. 38th Terrace

Summerfield, FL 34491

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Claudette Stevenson

Required Signature of Registered Agent

9-4-15

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.*

Claudette Stevenson

Required Signature of Incorporator

9-4-15

Date

15 SEP -8 PM 4:16  
FRI  
SEP 4 2015  
FRI  
SEP 4 2015