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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

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Account Number : 076077001702
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Fax Number : (407)423-1831

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: BEARLAKEAREACOALITION@GMAIL.COM

RECEIVED

16 MAR -4 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
BEAR LAKE AREA COALITION II, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAR -4 PM 12:47

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COVER LETTER

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

SUBJECT: Bear Lake Area Coalition II, 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: Mark Leavitt

Name (Printed or typed)

800 N. Magnolia Ave., Suite 1500

Address

Orlando, FL 32803

City, State & Zip

407-428-5139

Daytime Telephone number

bearlakeareacoalition@gmail.com

E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Bear Lake Area Coalition II, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Bear Lake Area Coalition II, Inc.: Attn: Carol Richardson

Mailing address, if different is:

9477 Shortleaf Court

Apopka, FL 32703

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To promote the common good, general welfare and the civic betterment of the residents and homeowners of single-family homes and home sites located within two (2) miles of Bear Lake, Seminole County, Florida (the "Bear Lake Area"), by engaging in activities to cooperate, investigate, advance knowledge, negotiate, challenge, litigate, and/or take other appropriate actions related to land use, zoning development, construction and occupation of real property located in the Bear Lake Area.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Pursuant to Bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carol Richardson, President and Director Name and Title: George Helm, Vice President/Director

Address: 9477 Shortleaf Court Address: 6047 Linneal Beach Dr.
Apopka, FL 32703 Apopka, FL 32703

Name and Title: Bonnie Ramos, Secretary and Director Name and Title: Jacob Jakubowski, Treasurer/Director

Address: 9524 Shortleaf Court Address: 1262 Bear Lake Road
Apopka, FL 32703 Apopka, FL 32703

Name and Title: Dale Kencipp, Director Name and Title: Omer Eyal, Director

Address: 9518 Shortleaf Court Address: 3410 Holliday Ave.
Apopka, FL 32703 Apopka, FL 32703

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Name and Title: Mark Leavitt, Director

Name and Title: _____

Address: 6095 Linneal Beach Dr.

Address: _____

Apopka, FL 32703

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SECRETARY OF STATE
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: _____

Carol Richardson

Address: _____

9477 Shortleaf Court

Apopka, FL 32703

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____

Mark Leavitt

Address: _____

800 N. Magnolia Ave., #1500

Orlando, FL 32703

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

Carol Richardson
Required Signature of Registered Agent

March 4, 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.

Mark Leavitt
Required Signature of Incorporator

March 4, 2015

Date

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