

W16000002748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

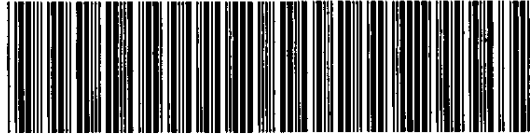
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W16-15199

umd 3/15

## COVER LETTER

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

SUBJECT: OLD HOMOSASSA VETERAN'S MEMORIAL  
(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: RICHARD R. BACHTEL  
Name (Printed or typed)

8565 W. LONGFELLOW ST  
Address

HOMOSASSA, FL 34448  
City, State & Zip

352-628-0190  
Daytime Telephone number

rbachtel@tampabay.rr.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 1, 2016

RICHARD R. BACHTEL  
8565 W. LONGFELLOW ST.  
HOMOSASSA, FL 34448

SUBJECT: OLD HOMOSASSA VETERAN'S MEMORIAL  
Ref. Number: W16000015199

We have received your document for OLD HOMOSASSA VETERAN'S MEMORIAL and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

The "MAILING ADDRESS" can be used as the PRINCIPAL STREET ADDRESS.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://www.sunbiz.org/titledef.html>.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of 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.

Maryanne Dickey

Regulatory Specialist II  
New Filing Section

Letter Number: 916A00004278

## COVER LETTER

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

SUBJECT: OLD HOMOSASSA VETERAN'S MEMORIAL, 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  
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& Certified Copy

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352-628-0190  
Daytime Telephone number

rbachtel@tampabay.rr.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** OLD HOMOSASSA VETERAN'S MEMORIAL, INC  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
8565 W. Longfellow St

HOMOSASSA, FL 34448

Mailing address, if different is: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE III PURPOSE** TO GIVE RECOGNITION TO THE VETERANS OF THE CITRUS  
The purpose for which the corporation is organized is: \_\_\_\_\_  
COUNTY COMMUNITY AS A LASTING REMEMBRANCE OF THEIR SERVICE AND SACRIFIC TO THE UNITED  
STATES OF AMERICA.

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

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

Name and Title: SHONA M. COOK, DIRECTOR Name and Title: RICHARD R BACHTEL PRESIDENT

Address: 218 LINCOLN ST Address: 8565 W. LONGFELLOW ST  
FARRELL, PA 16121 HOMOSASSA, FL 34448

Name and Title: MARK J LONG SR, TREASURER Name and Title: \_\_\_\_\_

Address: 6048 S SAINT MICHAEL PT Address: \_\_\_\_\_  
HOMOSASSA, FL 34448

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Name: RICHARD R. BACHTEL  
Address: 8565 W. LONGFELLOW ST  
HOMOSASSA, FL 34448

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RICHARD R. BACHTEL  
Address: 8565 W. LONGFELLOW ST  
HOMOSASSA, FL 34448

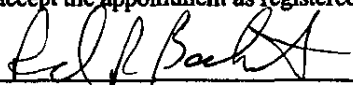
**ARTICLE VIII EFFECTIVE DATE:**

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

  
Required Signature of Registered Agent

3-12-2016  
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

3-12-2016  
Date