

N16000006471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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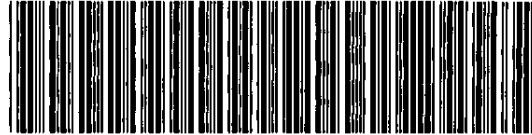
(Business Entity Name)

(Document Number)

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## COVER LETTER

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

SUBJECT: Wildwood Heights Neighborhood Assoc. 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: Emma Jean Hammond  
Name (Printed or typed)

2436 9th Ave. So.  
Address

St. Petersburg, FL 33712-2106  
City, State & Zip

727 327-6315  
Daytime Telephone number

Plantham@aol.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: Wildwood Heights Neighborhood Assoc. Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

2436 9 Avenue So  
St. Petersburg, FL 33712

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To enhance and beautify the  
Wildwood Heights Neighborhood. Also, association  
will instill a sense of pride to homeowners  
and tenants alike.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Recommended  
by Nominating Committee and from the floor, Voted on by  
Members present.

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

Name and Title: Catherine Weaver Name and Title: President

Address: 921 24 St. So Address: \_\_\_\_\_  
St. Petersburg, FL 33712

Name and Title: Emma Jean Hammond Name and Title: V President

Address: 2436 9 Ave. So Address: \_\_\_\_\_  
St. Petersburg, FL 33712

Name and Title: Charles Weaver Name and Title: Secretary

Address: 921 24 St. So Address: \_\_\_\_\_  
St. Petersburg, FL 33712

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Name and Title: Helen Davis Name and Title: Asst Secretary

Address: 2413 14 Ave. So Address: \_\_\_\_\_  
St. Petersburg, FL 33712

Name and Title: Nikishia Dixon Name and Title: Treasurer

Address: 2400 Irving Ave So Address: \_\_\_\_\_  
St. Petersburg, FL 33712

**ARTICLE VI REGISTERED AGENT**

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

Name: Emma Jean Hammond  
Address: 2436 9 Ave. So.  
St. Petersburg, FL 33712-2106

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Emma Jean Hammond  
Address: 2436 9 Ave. So  
St. Petersburg, FL 33712-2106

**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

Emma Jean Hammond  
Required Signature of Registered Agent

1-17-16  
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.

Emma Jean Hammond  
Required Signature of Incorporator

1-17-16  
Date