## N16000008309

(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

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

INVERNESS HIGHLANDS CRIME WATCH AND SURVEILLANCE UNIT, INC.					
	(PROPOSED CORPO	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)		
Enclosed is an original and	one (1) copy of the Artic	les 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 CO	PY REQUIRED		
FROM:	Tomas Williams		_		
	Name (Printed or typed)				
	6168 E. Dell Lane				
_		Address	_		
	Inverness, FL 34452				

bamaball@embarqmail.com

352-341-0390

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

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

City, State & Zip

Daytime Telephone number

## ARTICLES OF INCORPORATION

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

ARTICLE II	PRINCIPAL OFFICE					
	Principal street address:		Mailing address if differe	ent ice		
6065 E	. Dell Lane		Mailing address, if different is:			
Inverne	ess, FL 34452					
ARTICLE III The purpose for crime prevention	which the corporation is organized is: _	1) to promote citizen	awareness and encourage activ	ve partici	pation i	n
(2) to augment	the work of the Citrus County Sheriff's l	Department, under the	guidelines provided by the Ci	trus Cou	nty, Flo	rida
Sheriff's Offic	e, or his designee. The volunteer crime	watch surveillance un	it shall patrol areas of Citrus C	County,		
as outlined by	the Sheriff. The Citrus County Sheriff's	Office has establishe	d specific by-laws that shall be	followed	d	•
	<del></del>					
by all crime wa	atch individuals and surveillance units.					
	atch individuals and surveillance units.  MANNER OF ELECTION The man	ner in which the direct	tors are elected and appointed:	majority	ballot	
4RTICLE IV			tors are elected and appointed:	majority	ballot	
by all crime water the state of	MANNER OF ELECTION The man	<u>CTORS</u>	tors are elected and appointed:		ballot	
ARTICLE IV	MANNER OF ELECTION The man		iors are elected and appointed: _		ballot	
ARTICLE IV  IRTICLE V  Name and Title:	MANNER OF ELECTION The man	<u>CTORS</u> Name and Title:_	WAYNE ALLEN, Treasurer		ballot	-
ARTICLE IV  IRTICLE V  Name and Title:	MANNER OF ELECTION The man  INITIAL OFFICERS AND/OR DIRECT  THOMAS WILLIAMS, President  6168 E. Dell Lane	<u>CTORS</u> Name and Title:_	WAYNE ALLEN, Treasurer		ballot	
ARTICLE IV  Name and Title:	MANNER OF ELECTION The man  INITIAL OFFICERS AND/OR DIRECT  THOMAS WILLIAMS, President  6168 E. Dell Lane  Inverness, FL 34452  ARIZONA ALLEN Secretary	Name and Title: Address:	WAYNE ALLEN, Treasurer 6065 E. Dell Lane Inverness, FL 34452		16 AU	i i
ARTICLE IV  Name and Title: Address	MANNER OF ELECTION The man  INITIAL OFFICERS AND/OR DIRECT  THOMAS WILLIAMS, President  6168 E. Dell Lane  Inverness, FL 34452  ARIZONA ALLEN, Secretary  6065 E. Dell Lanc	Name and Title: Address: Name and Title:_	WAYNE ALLEN, Treasurer		ballot	j (i
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ARTICLE IV  Name and Title: Address  Name and Title:	MANNER OF ELECTION The man  INITIAL OFFICERS AND/OR DIRECT  THOMAS WILLIAMS, President 6168 E. Dell Lane Inverness, FL 34452  ARIZONA ALLEN, Secretary 6065 E. Dell Lane Inverness, FL 34452	Name and Title: Address: Name and Title: Address: Address:	WAYNE ALLEN, Treasurer 6065 E. Dell Lane Inverness, FL 34452	TALLAND SECTION OF THE SECTION OF TH	16 AUG 11 AM	-;
ARTICLE IV  ARTICLE V  Name and Title: Address  Name and Title:	MANNER OF ELECTION The man  INITIAL OFFICERS AND/OR DIRECT  THOMAS WILLIAMS, President  6168 E. Dell Lane  Inverness, FL 34452  ARIZONA ALLEN, Secretary  6065 E. Dell Lane	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:	WAYNE ALLEN, Treasurer 6065 E. Dell Lane Inverness, FL 34452	TALLAND SECTION OF THE SECTION OF TH	16 AUS 11 AM 9: 1	-;

Name and Title:	•	Name and Title:		-
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Name and Title:		Name and Title:		-
Address _		Address:		-
-				<u>.</u>
	REGISTERED AGENT lorida street address (P.O. Box NOT ac Wayne Allen	ceptable) of the registered agent i	s:	
Address:	6065 E. Dell Lane	<del></del>	Pio min min min min	5 E 7
	Inverness, FL 34452		## ## ( )	
	INCORPORATOR ddress of the Incorporator is:		'	10 THE
Name:	Thomas Williams		(1) (2)	<del>u</del> <del>u</del>
Address:	6168 E. Dell Lane		fr-	
	Inverness, FL 34452			
Effective date, it	EFFECTIVE DATE:  f other than the date of filing:  date is listed, the date must be specific			huningas dava
after the filing.)		and cannot be more than live	business days prior or 90 i	Dusiness days
	e inserted in this block does not meet the ctive date on the Department of State's re		rements, this date will not be	e listed as the
certificate, I am	med as registered agent to accept serving familiar with and accept the appointment	nt as registered agent and agree to		designated in thi
_ wa	AUABequired Signature of Register		August 5,	2016
			Date	<del></del>
	cument and affirm that the facts stated h nt of State constitutes a third degree felo			tted in a documen
The	sof mes		August 5,	2016
THOMA	Required Signature of Inc	corporator	Date	
INOMA	SE Will AMS			