

N16000008337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

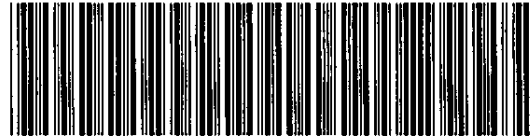
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 JUL -8 10:19
TALLAHASSEE, FLORIDA
Dkt
8/24/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 15, 2016

KEN THOMAS
1325 NORTH GRANDVIEW STREET
MOUNT DORA, FL 32757

SUBJECT: HOLDEN HEIGHTS COMMUNITY DEVELOPMENT
CORPORATION
Ref. Number: W16000049333

We have received your document for HOLDEN HEIGHTS COMMUNITY DEVELOPMENT CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

INCORPORATOR MUST SIGN.

Please return 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.

TANYA L HENDERSON
Regulatory Specialist II

Letter Number: 416A00014889

16 AUG -8 PM 3:19

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16 AUG -8 PM 4:41

RECEIVED

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COVER LETTER

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

SUBJECT: Holden Heights Community Development Corporation

(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: Ken Thomas

Name (Printed or typed)

1325 North Grandview Street

Address

Mount Dora, Florida 32757

City, State & Zip

Daytime Telephone number

redevplan1@yahoo.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: Holden Heights Community Development Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address:

9300 Conroy Windermere Road, #1616

Windermere, Florida 34786

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The CDC is being incorporated to provide community, housing and economic development services for the Holden Heights Community and surrounding areas. The CDC will focus on alleviating poverty and physical deterioration in the community.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Stated By-Laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Thomas Alston, CEO

Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: Jonathan Blount, Secretary

Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: James Watkins, Vice Chair

Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: Rufus Cliatt, Board Member

Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: Hudie Stone, Treasurer

Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: Gail Gardner, Board Member

Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

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Name and Title: Leroy Rose III, Board Member
Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: Larry Williams, Board Member
Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: John Smith, Board Member
Address: 9300 Conroy Windermere Road #1616
Windermere, Florida 34786

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Ken Thomas
Address: 1325 North Grandview Street
Mount Dora, Florida 32757

ARTICLE VII INCORPORATOR

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

Name: _____
Address: _____

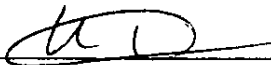
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: July 4, 2016 (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

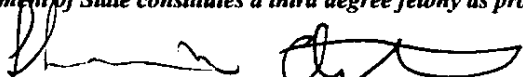


Required Signature of Registered Agent

06/29/2016

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

7-28-16

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 AUG - 8 AM 9:19
FILE