

N16000009401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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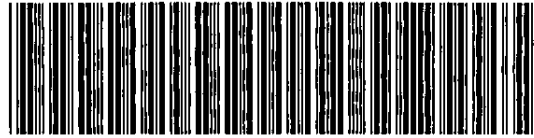
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 SEP 23 PM 12:23

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COVER LETTER

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

SUBJECT: HeartSong Health In Community 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: Ani Hawkinson
Name (Printed or typed)

5553 Hogan Lane
Address

Winter Haven, FL 33884
City, State & Zip

802-387-2345
Daytime Telephone number

Community@heartsonghealth.org
E-mail address: (to be used for future annual report notification)

EIN: 26-0907331

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

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

ORIGINAL

ARTICLE I NAME

The name of the corporation shall be: HeartSong Health In Community Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:
5553 Hogan Lane

Winter Haven, FL 33884

Mailing address, if different is:

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: HeartSong Health In Community is a 501(c)(3) holistic public charity that
helps people achieve their highest physical and mental potential. We offer health promotion services for chronic illness due to
advancing age or challenging life circumstances. To better serve diverse needs, we personalize our offerings according to age and
ability, health status and goals, faith and culture.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Julie Jansen, President

Address HeartSong Health In Community
5553 Hogan Lane
Winter Haven FL 33884

Name and Title: Ani Hawkinson, Executive Director

Address: HeartSong Health in Community
5553 Hogan Lane
Winter Haven FL 33884

Name and Title: Omer van der Horst, Treasurer/Secretary

Address HeartSong Health In Community
5553 Hogan Lane
Winter Haven FL 33884

Name and Title: Ruby McAdoo

Address: HeartSong Health In Community
5553 Hogan Lane
Winter Haven FL 33884

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Ani Hawkinson

Address: 5553 Hogan Lane

Winter Haven FL 33884

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ani Hawkinson

Address: 5553 Hogan Lane

Winter Haven FL 33884

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

Ani Hawkinson
Required Signature of Registered Agent

9/6/16
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.

Ani Hawkinson
Required Signature of Incorporator

9/6/16
Date

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