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STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: East Hillsborough Democratic Club, 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: Donna Lec Fore

Name (Printed or typed)

6615 Summer Cove Dr.

Address

Riverview, FL 33578

City, State & Zip

813-528-0902

Daytime Telephone number

donnafore4@gmail.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: East Hillsborough Democratic Club, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
6615 Summer Cove Dr.
Riverview, FL 33578

Mailing address, if different is:
P.O. Box 3383
Brandon, FL 33509

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

_____ A Democratic political club that meets monthly to discuss and educate the Club members on
_____ local, state, and national issues influencing the Democratic Party.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Voted by Membership

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Donna Lee Fore, President</u>	Name and Title:	<u>Christopher Radulich, Vice President</u>
Address	<u>6615 Summer Cove Dr</u> <u>Riverview, FL 33578</u>	Address:	<u>139 Shell Falls Dr.</u> <u>Apollo Beach, FL 33572</u>
Name and Title:	<u>John Fitzhenry, Treasurer</u>	Name and Title:	<u>Kathy Gallun, Secretary</u>
Address	<u>3032 Wister Cr.</u> <u>Valrico, FL 33596</u>	Address:	<u>4312 Glendon Pl.</u> <u>Valrico, FL 33596</u>
Name and Title:	<u>Keith Trader, 2nd Parliamentarian</u>	Name and Title:	<u>Ray Wood, Parliamentarian</u>
Address	<u>4007 Eastridge Dr</u> <u>Valrico, FL 33596</u>	Address:	<u>1150 Country Trace</u> <u>Brandon, FL 33511</u>

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Donna Lee Fore
Address: 6615 Summer Cove Dr.
Riverview, FL 33578

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Donna Lee Fore
Address: 6615 Summer Cove Dr
Riverview, FL 33578

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

Donna Lee Fore
Required Signature of Registered Agent

October 20, 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.

Donna Lee Fore
Required Signature of Incorporator

October 20, 2016

Date