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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W17-024484

04/07/17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2017

LUCINDA RICH
523 N. 12TH ST.
FT. PIERCE, FL 34950

SUBJECT: END TIME COMMUNITY DEVELOPMENT FOUNDATION INC.
Ref. Number: W17000024484

RECEIVED
BUREAU OF CORPORATE
REGISTRATION SERVICES

17 APR -4 PM 2:21

We have received your document for END TIME COMMUNITY DEVELOPMENT FOUNDATION INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please submit **ONLY ONE** Set of "Articles of Incorporation". Multiple sets cause confusion and are unacceptable.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of 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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 517A00005453

COVER LETTER

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

SUBJECT: End Time Community Development Foundation
(PROPOSED CORPORATE NAME) MUST INCLUDE SUFFIX Inc.

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: Lucinda Rich
Name (Printed or typed)

523 N. 12th Street
Address

Fort Pierce, FL 34950
City, State & Zip

772-465-6126
Daytime Telephone number

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: End Time Community Development Foundation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3720 Okcechobee Rd.
Fort Pierce, FL 34946

Mailing address, if different is:

P.O. Box 1175
Fort Pierce, FL 34954

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This foundation will provide after school tutorials for students within the community that struggle with reading, writing, and math skills at their grade level. We will provide community functions and activities to build self-esteem, deter violence and bullying using community speakers such as the sheriff's department, commissioners, and other city officials. We will provide summer camps yearly and field trips to various businesses in our community. We believe positive exposure is important to deter some of the problems in our community.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Initially, members are appointed and yearly members will be appointed by conditions stated in our by-laws. Directors are appointed by conditions stated in our by-laws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>President and Executive Dir</u>	Name and Title: <u>Bobby Williams - Director</u>
Address: <u>Lucinda Rich</u>	Address: <u>2019 South 26th Street</u>
<u>523 N. 12th St</u>	<u>Fort Pierce, FL 34947</u>
<u>Ft. Pierce, FL 34950</u>	

Name and Title: <u>Keisha Reynolds - Director</u>	Name and Title: <u>Angela Vickers - Director</u>
Address: <u>1160 3rd Way Apt. 201</u>	Address: <u>2003 N. 51st St</u>
<u>Vero Beach, FL</u>	<u>Fort Pierce, FL 34947</u>
<u>32960</u>	

Name and Title: <u>Joyce Smith - Director</u>	Name and Title: <u>Reginald Vickers - Treasurer</u>
Address: <u>4807 Myrtle Dr.</u>	Address: <u>2003 N. 51st Street</u>
<u>Fort Pierce, FL</u>	<u>Fort Pierce, FL 34947</u>
<u>34982</u>	

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-4 PM 12:11
CLERK OF STATE
TALLAHASSEE, FLORIDA

Name and Title: Sylvia Johnson - Secretary Name and Title: _____

Address: 2837 Stoneway Ln. Apt A Address: _____
Fort Pierce, FL 34982

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: Lucinda Rich

Address: 523 N. 12th St
Ft. Pierce, FL 34950

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lucinda Rich

Address: 3720 Okee chobee Road
Ft. Pierce, FL 34946

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: March 16, 2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

Lucinda Rich
Required Signature of Registered Agent

March 29, 2017
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.

Lucinda Rich
Required Signature of Incorporator

March 29, 2017
Date