

3/25/22, 3:32 PM

Division of Corporations

N220001113063

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

2959

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001113063)))



H220001113063ABCQ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954)208-0845
Fax Number : (614)573-3996

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

2022 MAR 25 PM 4:00

CORPORATIONS
COMMERCIAL
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION

Clearlake Ranches Homeowners Association Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR 25 AM 10:50

FILED

Electronic Filing Menu

Corporate Filing Menu

Help D. O'KEEFE

MAR 28 2022

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Clearlake Ranches Homeowners Association Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

9128 Strada Place Suite 210

Naples, FL 34108

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To manage all homeowner's association dues by collection and disbursement to all related homeowner's association invoices

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jonathan Riley, President

Address: 1605 Curlew St
Naples, FL 34102

Name and Title: _____

Address: _____

Name and Title: Katherin Dubbins, Vice President

Address: 7050 Sugar Magnolia Circle
Naples, FL 34109

Name and Title: _____

Address: _____

Name and Title: Denise Jinkens, Secretary

Address: 10767 Essex Square Blvd
Fort Myers, FL 33913

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR 25 AM 10:50

FILED

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: C T Corporation System

Address: 1200 South Pine Island Road Plantation,
Florida 33324**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Angela Caron

Address: 183 Water St
Williamstown, MA 01267**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 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*By: Danise Bell
Required Signature of Registered Agent

3/24/2022

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.*Angela Caron
Required Signature of Incorporator

3/24/2022

Date

FILED
2022 MAR 25 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA