

NR000009355

(Requestor's Name)

(Address)

(Address)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

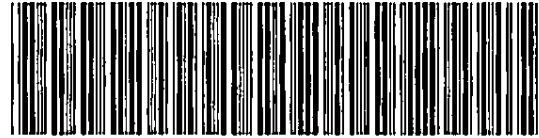
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W2dmc 84897

T. SCOTT

AUG 15 2022



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TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 23, 2022

RAYMOND H. CARLSON
241 WOODGATE DRIVE
PONTE VEDRA, FL 32081

SUBJECT: DEL WEBB NOCATEE ASSOCIATION OF VETERANS AND
SUPPORTERS, INC.
Ref. Number: W22000084891

We have received your document for DEL WEBB NOCATEE ASSOCIATION OF VETERANS AND SUPPORTERS, 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):

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.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 922A00014185

COVER LETTER

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

SUBJECT: DEL WEBB NOCATEE ASSOCIATION OF VETERANS AND SUPPORTERS, 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: RAYMOND H. CARLSON

Name (Printed or typed)

241 WOODGATE DRIVE

Address

PONTE VEDRA, FL 32081

City, State & Zip

904-233-7375

Daytime Telephone number

raycarlson77@hotmail.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: DEL WEBB NOCATEE ASSOCIATION OF VETERANS AND SUPPORTERS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
241 WOODGATE DRIVE

PONTE VEDRA, FL 32081

Mailing address, if different is:

ARTICLE III PURPOSE

Purpose for which the corporation is organized is: Promote the social welfare of the Del Webb Nocatee community; Provide assistance to veterans and active duty members of the armed forces; Coordinate the raising of funds and assist in the design, construction and maintenance of a community veterans' memorial; Organize community military recognition events; Provide social and recreational activities for members of the Del Webb Nocatee community; Support other community charitable organizations and activities; and engage in other activities supportive of these purposes.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: ALL Director/ Officer positions ARE SUBJECT TO ANNUAL ELECTIONS IN SEPTEMBER.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MR. MICHAEL DIONIAN

Address: PRESIDENT / COMMANDER

18 GRAY OWL POINT

PONTE VEDRA, FL 32081

Name and Title: MR. MARK SANDERSON

Address: VICE PRESIDENT/VICE COMMANDER

76 WOODGATE DRIVE

PONTE VEDRA, FL 32081

Name and Title: MR. RICHARD UNGERBUEHLER

Address: SECRETARY

190 WOODGATE DRIVE

PONTE VEDRA, FL 32081

Name and Title: MR. WARREN MOORE

Address: TREASURER

162 WOODGATE DRIVE

PONTE VEDRA, FL 32081

Name and Title: AND NO OTHERS

Address:

Name and Title:

Address:

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2022 AUG 12 AM 9:45
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: RAYMOND H. CARLSON

Address: 241 WOODGATE DRIVE

PONTE VEDRA, FL 32081

ARTICLE VII INCORPORATOR

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

Name: RAYMOND H. CARLSON

Address: 241 WOODGATE DRIVE

PONTE VEDRA, FL 32081

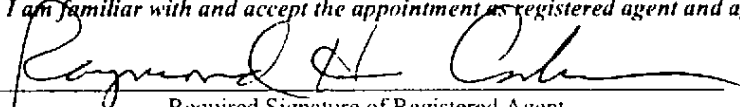
ARTICLE VIII EFFECTIVE DATE:

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.)

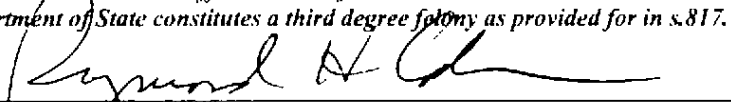
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature of Registered Agent

5/31/22
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

5/31/22
Date