

N23000000951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

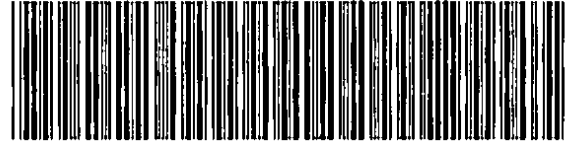
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W22000156118

Office Use Only



800398126338

12/14/22--01010--001 **79.75

[Handwritten signature]

FILED

2023 JAN 27 PM 8:04

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: Gulf Coast Guard and Percussion Circuit, 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: Tabitha Dampson

Name (Printed or typed)

4215 Frasier Lane

Address

Pace, FL 32571

City, State & Zip

850.503.7037

Daytime Telephone number

Bod@gcgpc.org

E-mail address: (to be used for future annual report notification)

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

FILED
2023 JAN 27 PM 8:04
SECRETARY OF STATE
TALLAHASSEE, FL

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

ARTICLE I NAME

The name of the corporation shall be: Gulf Coast Guard and Percussion Circuit, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4215 Frasier Lane

Pace, Florida 32571

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To assist area color guard, percussion and winds ensembles financially and through

leadership in achieving a means to provide opportunity for competition corresponding but not

limited to the Winterguard International's rules and guidelines. To provide a means to facilitate

the exchange of ideas and information on subjects of common interest, namely winter guard and

winter percussion.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Board members are nominated and elected every two years by membership.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tabitha Dampson/ Executive Director

Address: 4215 Frasier Lane
Pace FL 32471

Name and Title: Leeanne Harry/Director of Treasury

Address: 3661 Airport Blvd apt 379
Mobile, AL 36608

Name and Title: Ashley Johnson/Assistant Director

Address: 1011 Pineview Blvd
Ft. Walton Beach, Florida 32547

Name and Title: Mark Foster/Director of Percussion

Address: 556 Morphy Avenue
Fairhope, AL 36532

Name and Title: Jerry Holzworth/Director of Secretarial

Address: 6107 Walton Street
Pensacola, Florida 32503

Name and Title: Samantha Byrd/Director of Color Guard

Address: 5582 Windham Road
Milton, Florida 32570

SECRETARY OF STATE
TALLAHASSEE, FL

2023 JAN 27 PM 8:04

FILED

Name and Title: David Kersey/Director of Winds Name and Title: _____
Address: 5500 Kauffman Road Address: _____
Milton, Florida 32570 _____

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: Tabitha Dampson
Address: 4215 Frasier Lane
Pace fl 32571

ARTICLE VII INCORPORATOR

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

Name: Lecanne Harry
Address: 3661 Airport Blvd apt 379
Mobile, AL 36608

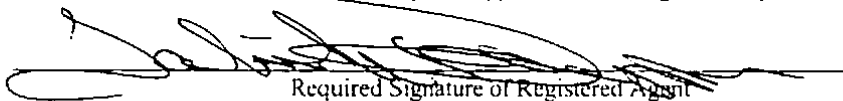
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: August 21, 2022 (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.)

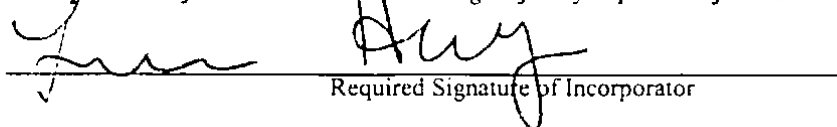
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

— *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

1/7/23
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

1/7/23
Date

FILED
2023 JAN 27 PM 8:04
SECRETARY OF STATE
TALLAHASSEE, FL