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| (Re | equestor's Name) | | |
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| (Address) | | | |
| (Ac | ldress) | | |
| (Ci | ty/State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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ARTICLES OF INCORPORATION In compliance with Chapter 617, F.S., (Not for Profit)

| ARTICLE I The name of the | <u>NAME</u> Veterans Council of l | Barefoot Bay Flori | ida, Inc. | |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------------------------------|------------------------------|
| ARTICLE II | PRINCIPAL OFFICE | | | |
| 931 B | Principal <u>street</u> address: arefoot Blvd. # 1 | | Mailing address, if different is: | |
| Barefe | oot Bay, Florida | | | w |
| 32976 | · | | | |
| ARTICLE III The purpose for liaison between | PURPOSE | o serve as a local | affiliate of Military Veterans organization | ns, to act as they affect |
| veterans and th | cit families, of Florida, and to uphold the i | deals, principals a | nd traditions of our armed forces. | |
| | | | * Aı | inual Meeting |
| ARTICLE IV | MANNER OF ELECTION The manner Than The Manner | | ectors are elected and appointed: Elected a | THE " |
| | Bourgault, Raymond E. / Commander | Name and Title | Blanchard, Spencer D. / 1st Vice Com. | |
| | 111 Pelican Island Place | Address: | 939 Cashew Circle | |
| | Sebastian, Florida | | Barefoot Bay, Florida | |
| | 32958 | _ | 32976 | |
| Nome and Title | Chevalier, Renec E. / 2nd Vice Com. | | Swint, Ronald D. J Adjutant | 2024 1. |
| Address | 904 Dogwood Drive | Name and Title | 973 Laurel Circle | <i>j.</i> |
| | Barefoot Bay, Florida | _ Address: | Barefoot Bay, Florida | ÷ . |
| | 32976 | _ | 32976 | - - |
| Name and Title: | Bloch, Robert J. / Treasurer | _ | Swanson, Warren E. / Chaplain | |
| | 3599 Jute Lane | Name and Title | 425 Egret Circle | 45* — |
| | Palm Bay, Florida | _ Address: | Barefoot Bay, Florida | |
| | 32909 | _ | 32976 | |

| Name and Ti | Kules, Joseph // Sergeant of Arms | Name and Title: |
|--------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Address | 447 Marlin Circle | - |
| | Barefoot Bay, Florida | |
| | 32976 | |
| Name and Ti | ile: | Name and Title: |
| Address | | Address: |
| | | |
| | | |
| | | |
| ARTICLE V | I REGISTERED AGENT | |
| | nd Florida street address (P.O. Box NOT ac | reeptable) of the registered agent is, |
| Name: | Spencer D. Blanchard | |
| Address: | 939 Cashew Circle | |
| | Barefoot Bay, Florida 32976 | |
| | | |
| ARTICLE V | | |
| The name an | id address of the Incorporator is: | · |
| Name: | Raymond H. Bourgault | |
| Address: | 111 Pelican Island Place | · · · · · · · · · · · · · · · · · · · |
| | Sebastian, Florida 329958 | ~ |
| Effective dat | TH EFFECTIVE DATE: e, if other than the date of filing: ive date is listed, the date must be specific | OPTIONAL) c and cannot be more than five days prior or 90 days after the filing.) |
| | date inserted in this block does not meet the effective date on the Department of State's (| e applicable statutory filing requirements, this date will not be listed as the records. |
| | | ice of process for the above stated corporation at the place designated in this at as registered agent and agree to act in this capacity |
| ** | Required Signature of Registe | and 4/9/2024 red Agent Vale |
|] I submit this | , , | erein are true. I am aware that any false information submitted in a document to |
| | ent of State constitutes a third degree felony | as provided for in s.817.155, F.S. |
| | Aywork Bourge Required Signature of the | acce 4/9/2024 |
| 0 | Required Signature of In | corporator / Date |
| | | |