

NA4000008051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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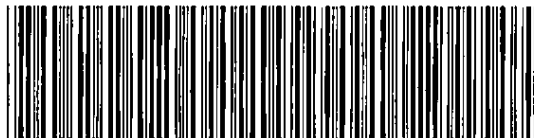
(Business Entity Name)

(Document Number)

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## COVER LETTER

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

SUBJECT: Forward Empowerment Foundation, 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: Barbara Flynn-Tolliver  
Name (Printed or typed)

339 Brier Rose Lane  
Address

Orange Park FL 32065  
City, State & Zip

904-282-9262  
Daytime Telephone number

Barbaraft41@yahoo.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**

### **ARTICLE I**

*The name of the corporation shall be: **Forward Empowerment Foundation, Inc.***

**EIN Number: 991841171**

### **ARTICLE II**

*The Principal Office Address: 6910 New Kings Road, Jacksonville, Florida 32219*

### **ARTICLE III**

*The purpose for which the corporation is organized is: To develop, maintain, provide and participate in educational programs for the general public, for church and religious organizations, private groups and to assist with community development and economic development.*

### **ARTICLE IV**

*Officers shall be appointed for the first two year term and shall be elected by the body after the end of their term at the annual meeting.*

### **ARTICLE V**

*The Officers appointed at the organizational meeting:*

**Dr. Willie N. Barnes, Jr., Chairman/CEO, 3415 Kindewood Dr., Middleburg, Fl 32068**

**Dr. Shirley Jones, Vice President, 1431 Riverplace Blvd. Jacksonville, Fl. 32207**

**William D. Sweet, Jr., Treasurer, 3705 Mindy Ashley Lane, Jacksonville, Fl. 32218**

**Betty Burney, Secretary, 5626 International Dr., Jacksonville, Fl., 32219**

**Barbara Flynn-Tolliver, Registered Agent, 339 Brier Rose Lane, Orange Park, Fl. 32065**

### **ARTICLE VI**

*The name and address of the Incorporation is:*

**Barbara Flynn-Tolliver, 339 Brier Rose Lane, Orange Park, Florida 32065**

**ARTICLE VII**

Effective date, **June 30, 2024.**

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certification, I am familiar with and accept the appointment and agree to act in this capacity.

B. Flynn-Jellison      June 25, 2024

Required Signature of Registered Agent.

Date:

I submit this document and affirm that the facts stated herein are true. I am aware that any false information in a document to the Department of State constitutes a triad degree felony as provided for in s.817.155, F.S.

B. Flynn-Jellison      June 25, 2024

Required Signature of Incorporator.

Date: