

N9500001104

TRANSMITTAL LETTER

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

SUBJECT: Havencrest 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

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: Kevin O. Mack
Name (Printed or typed)
40 E. Airy Street
Address
Norristown, PA 19404
City, State & Zip

(610) 275-8084 x3038

Daytime Telephone number Kevin O. Mack GAVE

AUTHORIZATION BY PHONE TO

CORRECT Corporate Info

DATE 2-1-97

DOC. EXAM 2/1/97

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

ARTICLES OF INCORPORATION

95
MAR 10 1995
FILED

The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I Name

The name of the corporation shall be: Havencrest Foundation Inc.

ARTICLE II Principal place of business and mailing address

The principal place of business and the mailing address of this corporation shall be:

P.O. Box 37043
Jacksonville, FL 32236

ARTICLE III Purpose(s)

The specific purpose(s) for which the corporation is organized is (are):

Funding Christian individuals and organizations, such as: missionaries, pastors, other Christian workers, church building funds, Christian law organizations and Christian radio stations.

ARTICLE IV Manner of election of directors

The manner in which the directors are elected or appointed is as follows:

Method of election of directors shall be stated in the bylaws.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Havencrest Foundation Inc.
(must include suffix)

2. The name and address of the registered agent and office is:

Dr. C. Garland Powell

(Name)

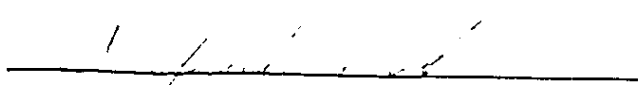
2855 Parrish Cemetery Drive

(Street address - P. O. Box not acceptable)

Jacksonville, FL 32221

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

3/3/95

(Date)

Registered Agent filing fee \$35.00