

N96000002799  
ST. AUGUSTINE CHRISTIAN SERVICE CENTER, INC.  
P.O. BOX 860014  
ST. AUGUSTINE, FLORIDA 32086

15 May 1996

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-05/21/96--01049--017  
\*\*\*122.50 \*\*\*122.50

Dear Secretary of State,

Enclosed you will find a check for the incorporation filing fee, registered agent fee, and the fee for a certified copy, as well as, the Incorporation application. Please note that on the page with signatures of the board members there is one name that has been whited out. At the time of the signing we were told he would not be able to be on the board.

I inquired to your office if it would be appropriate to send an original with a place that had been altered with white-out. I was assured that this would be acceptable.

If there are any questions please feel free to give us a call. Pastor Lois Turner, who is the registered agent's, phone number is 904-797-6040.

Sincerely,  
*Elizabeth Hunt*  
Elizabeth Hunt

FILED  
96 MAY 20 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5/28/96

73

## ARTICLES OF INCORPORATION

FOR

FILED  
MAY 20 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

ST. AUGUSTINE CHRISTIAN SERVICE CENTER, 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 860014 / St. Augustine, Florida 32086

### ARTICLE III. PURPOSE(S)

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

St. Augustine Christian Service Center is a group of volunteers from area churches who seek to meet the physical and spiritual needs of those individuals from the St. Augustine area that local public agencies are unable to meet. This is done through evaluating needs, referrals to cooperating churches, individuals, businesses, service organizations, etc. St. Augustine Christian Service Center will also attempt to meet the emergency needs as resources are available.

### ARTICLE IV. MANNER OF ELECTION OF DIRECTORS

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

TO BE STATED IN BY-LAWS

#### ARTICLE V. LIMITATION OF CORPORATE POWERS

The corporate powers of the corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows:

N/A

#### ARTICLE VI. INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and the street address of the initial registered agent is:

The Reverend Lois Turner  
1065 Kings Estate Rd.  
St. Augustine, Florida 32086

#### ARTICLE VII. INCORPORATORS

The name(s) and street address(es) of the incorporator(s) for these Articles of Incorporation is (are):

The Rev. Paul C. Canepa  
10 Tarpon Dr.  
St. Augustine, Fl. 32084

The Rev. Lois Turner  
1065 Kings Estate Rd.  
St. Augustine, Fl. 32086

Mrs. Audrey L. Hellier  
420 Camellia Trail  
St. Augustine, Fl. 32086

The Rev. James V. Lee  
580 Live Oak St.  
St. Augustine, Fl. 32095

Mrs. Elizabeth L. Hunt  
2550 Shore Dr.  
St. Augustine, Fl. 32086

The Rev. LaVoy G. Newton, Jr  
346 Circle Dr. W.  
St. Augustine, Fl. 32095

The Rev. Deacon Robert L. Robertson  
610 Old Beach Rd.  
St. Augustine, Fl. 32084

The undersigned incorporators(s) has (have) executed these Articles of Incorporation this  
15<sup>th</sup> day of May, 1996.

Signature(s) of the Incorporator(s)

Paul C. Canepa +

The Reverend Paul C. Canepa  
Typed name of incorporator signing

Lois Turner

The Reverend Lois Turner  
Typed name of incorporator signing

Rev. LaVoy G. Newton, Jr.

The Reverend LaVoy G. Newton, Jr.  
Typed name of incorporator signing

James V. Lee

The Reverend James V. Lee  
Typed name of incorporator signing

Robert L. Roberts

The Rev. Deacon Robert L. Roberts  
Typed name of incorporator signing

\_\_\_\_\_

Typed name of incorporator signing

Audrey L. Hellier

Mrs. Audrey L. Hellier  
Typed name of incorporator signing

Elizabeth L. Hunt

Mrs. Elizabeth L. Hunt  
Typed name of incorporator signing

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

96 MAY 20 AM 11:33

FILED

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 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.

FILED  
96 MAY 20 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the corporation is: St. Augustine Christian Service Center, Inc.

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

(NAME)

1065 Kings Estate Road

(P.O. BOX NOT ACCEPTABLE)

St. Augustine, Florida 32086

(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 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

*Lois Turner*

DATE

4-25-96

REGISTERED AGENT FILING FEE: \$35.00