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TRANSMITTAL LETTER

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

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-09/30/99-01035-020
*****78.75 *****78.75

SUBJECT: Sarasota Information Center, 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: Warren Oakes
Name (Printed or typed)

2815 N. Tamiami Tr.
Address

Sarasota, FL 34234
City, State & Zip

(941) 374-4404
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1999 SEP 30 AM 8 17

FILED

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

10/5

FILED

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ARTICLES OF INCORPORATION
OF
SARASOTA INFORMATION CENTER, INC.,
A FLORIDA NONPROFIT CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article 1. Name. The name of the corporation is: Sarasota Information Center, Inc.

Article 2. Duration. The duration of the Corporation is perpetual.

Article 3. Purposes. The purpose of the corporation is as follows:

A. This corporation is a not-for-profit corporation organized under Chapter 617, Florida Statutes. It is not organized for the private gain of any person. The specific purposes of this corporation are to provide educational and leadership services as a community organization qualified for exemption under IRS §501 (c)(3).

B. To exercise all rights and powers conferred by the laws of the State of Florida upon nonprofit corporations.

C. Provided, however, that the corporation shall not engage in any action which is not permitted to be carried on by nonprofit corporations under the Internal Revenue code and no part of the net earnings of the Corporation shall inure to the benefit of or be distributable to its members, directors, or officers; but the Corporation shall be authorized and empowered to pay reasonable compensation to these people for services rendered, and to make payments and distributions in furtherance of its stated purposes.

Article 4. Principal Office: The principal place of business and mailing address of this corporation shall be: 2815 N. Tamiami Tr. Sarasota, FL 34234
Mailing address: 2815 N. Tamiami Tr. Sarasota, FL 34234

Article 5. Members. The Corporation shall have Voting Members, who shall be elected (and may be removed) by the voting Members, and who shall have all the rights and privileges of members of the Corporation. The Bylaws may provide for Nonvoting members or one or more classes, who shall be admitted in such manner and who shall have such rights and privileges as are set forth in the Bylaws, but who shall not have the right to vote. The name and address of each initial voting Member is as follows:

Warren Oakes 2815 N. Tamiami TR, Sarasota, FL 34234
DANIEL T. WOOD "
Jackie Gugliotti "

Article 6. Initial Registered Agent and Office. The initial registered agent is Jay Leland
and the initial registered office 440 N Tamiami Tr. Osprey, Florida 34229

Article 7. Initial board of Directors. The initial Board of Directors shall have 3
members whose names and addresses are:

Warren Oakes 2815 N. Tamiami Tr. Sarasota, FL 34234
DANIEL T. WOOD 2815 N. TAMIAMITR, SARASOTA, FL 34234
Jackie Guglietti "

The number of directors may be raised or lowered by amendment of the bylaws but shall in no case be less than three.

Directors shall be elected by the general membership at a meeting held on the first Thursday of each July and the procedure for election shall be as stated in the Bylaws.

9-2-99
Date

[Signature]
Signature

9-2-99
Date

[Signature]
Signature

9-2-99
Date

Warren Oakes
Signature

Date

Signature

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1999 SEP 30 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above state 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.

9/2/99
Date

[Signature]
Signature/Registered Agent