

POS000006878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000043028080

12/08/04--01010--014 \*\*07,50

SECRET  
TALLAHASSEE  
STATE  
FLORIDA  
05 JAN 13 AM 0:38

12/14/05

way 45060

TH 1/14/05

TRANSMITTAL LETTER

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

SUBJECT: FLORIDA VETERANS ASSISTANCE FOUNDATION, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

ADDITIONAL COPY REQUIRED

FROM: William Pacheco.  
Name (Printed or typed)

3248 LAUREL DALE DR.  
Address

TAMPA FL 33618  
City, State & Zip

813-285-4553 OR 813-486-6383.  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

December 9, 2004

WILLIAM PACHECO  
3248 LAUREL DALE DR  
TAMPA, FL 33618

SUBJECT: FLORIDA VETERANS ASSISTANCE FOUNDATION, INC.  
Ref. Number: W04000045060

RECEIVED  
05 JAN 13 AM 10:05  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for FLORIDA VETERANS ASSISTANCE FOUNDATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

An effective date may be added to the Articles of Incorporation **if a 2005 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Document Specialist  
New Filings Section

Letter Number: 304A00068942

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Florida Veterans Assistance Foundation, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

8870 North Himes Ave #303  
Tampa, FL, 33614

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and All Lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

President and Director / Michael Davison, 3248 Laurel Dale Dr. Tampa, FL, 33618  
Vice President / Stephen E. Crosby, 7549 Abonado Rd. Tampa, FL, 33615

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Michael Davison, 3248 Laurel Dale Dr. Tampa, FL, 33618

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Michael Davison, 3248 Laurel Dale Dr. Tampa, FL, 33618

SECRETARY OF STATE  
FALL AHASSEE FLORIDA  
05 JAN 13 AM 9:38

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

Michael Davison  
Signature/Registered Agent

1-5-05  
Date

Michael Davison  
Signature/Incorporator

1-5-05  
Date

Michael Davison