## P05000/62174

(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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SECRETARY OF STATE,

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## **COVER LETTER**

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

SUBJECT:	Annuities PROPOSED CORPORA	FOR SENIO	RS, INC.
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Certified Copy & Certificate of Status
FROM:	FROM: Harry J. Parks Name (Printed or typed)  869 Fifth Avenue South Address		
	4	Florida 3 State & Zip  571-4121  Glephone number	34102

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED SECRETARY OF STATE TALLAHASSIS SLORIDA
ARTICLE I NAME The name of the corporation shall be:	05 DEC 12 PH 3: 24
Annuities for Seniors, INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:  869 Fifth Avenue South, Naples, F	lorida 34102
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Insurance (annuities)	
ARTICLE IV SHARES The number of shares of stock is:  / 0 O	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
Harry J. Parks, 7707 Groves Roa Florida 34109, President	d Naples
The name and Florida street address (P.O. Box NOT acceptable) of the recommendation of t	gistered agent is:
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	
Harry J. Parks 869 Fifth Avenue South, Naple.	s, Florida 34102
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree to	corporation at the place designated in this act in this capacity
Signature/Registered Agent	12/8/05 Date