

FC90000086378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

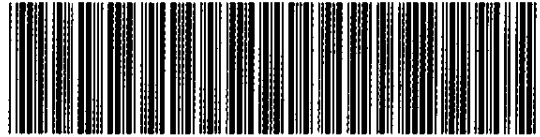
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-20-09
2009

COVER LETTER

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

SUBJECT: Princeton Healthcare Communications Corp.
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: M. Frank Skinner
Name (Printed or typed)

172 Beacon Lane
Address

Jupiter 33469
City, State & Zip

561-714-6916
Daytime Telephone number

fskinner3@comcast.net
E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be:

Princeton Healthcare Communications Corp.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

Ste. 274 177 US Hwy 1 Tequesta FL 33469

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide educational programs to physicians, pharmacists, and nurses

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

M. Frank Skinner, President

Penelope J. Buell-Skinner

ARTICLE VI REGISTERED AGENT

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

M. Frank Skinner

172 Beacon Lane

Jupiter FL 33469

ARTICLE VII INCORPORATOR

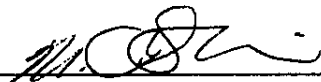
The name and address of the Incorporator is:

M. Frank Skinner

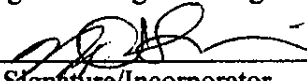
172 Beacon Lane

Jupiter, FL 33469

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



Signature/Registered Agent



Signature/Incorporator

10/14/09

Date

10/14/09

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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