

7120000450.50

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

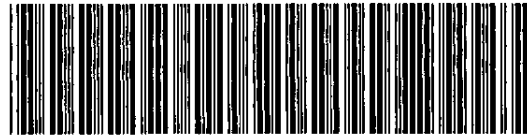
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000234979020

05/14/12--01034--021 \*\*78.75

FILED  
2012 MAY 14 AM 11:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers MAY 15 2012

## COVER LETTER

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

**SUBJECT: Paradise Community Association Management, 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: Joan M. Colosimo

Name (Printed or typed)

4936 Hawaii Boulevard

Address

Naples, FL 34112

City, State & Zip

239-601-5157

Daytime Telephone number

managerhome@comcast.net

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 MAY 14 AM 11:42

FILED

**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: Paradise Community Association Management, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
4936 Hawaii Boulevard  
Naples, Florida 34112

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Community Association management and all other legal business purposes of any nature.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000 AUTHORIZED

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

Name and Title: Joan Colosimo, President/Treasurer  
Address: 4936 Hawaii Boulevard  
Naples, Florida 34112

Name and Title: Dominic P. Sutherland, Director  
Address: 4936 Hawaii Boulevard  
Naples, Florida 34112

Name and Title: Julian G. Barron, Vice President/Secretary  
Address: 4936 Hawaii Boulevard  
Naples, Florida 34112

Name and Title: Lindsey R. Barron Director  
Address: 4936 Hawaii Boulevard  
Naples, Florida 34112

Name and Title: Jennifer M. McIntosh, Director  
Address: 4936 Hawaii Boulevard  
Naples, Florida 34112

Name and Title:  
Address:

**ARTICLE VI REGISTERED AGENT**

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

Name: Joan M. Colosimo  
Address: 4936 Hawaii Boulevard  
Naples, Florida 34112

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

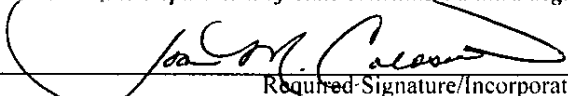
Name: Joan M. Colosimo  
Address: 4936 Hawaii Boulevard  
Naples, Florida 34112

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

  
Required Signature/Registered Agent

5-10-12  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
Required Signature/Incorporator

5-10-12  
Date

FILED  
2012 MAY 14 AM 11:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA