

P130000086345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

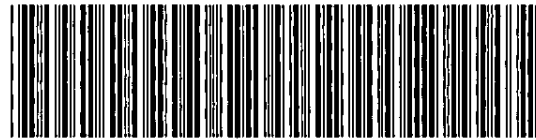
(Business Entity Name)

(Document Number)

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

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10/23/13--01001--018 \*\*78.75

RECEIVED  
13 OCT 22 PM 4:00  
DIVISION OF CORPORATIONS

FILED  
2013 OCT 22 AM 9:02  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

1/14

## COVER LETTER

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

SUBJECT: HARBOR OAKS HOMEOWNERS' ASSOCIATION, 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: SCOTT TORRIE, ESQ.  
Name (Printed or typed)

28471 U.S. HIGHWAY 19 NORTH, SUITE 505  
Address

CLEARWATER FL 33761  
City, State & Zip

727.239.8169  
Daytime Telephone number

TORRIE.LAW@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

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

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

HARBOR OAKS HOMEOWNERS'

ASSOCIATION, INC.

Signature \_\_\_\_\_

Requested by: Seth

10/22/13

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

- ☒ Art of Inc. File \_\_\_\_\_
- \_\_\_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_\_\_ Foreign Corp. File \_\_\_\_\_
- \_\_\_\_\_ L.C. File \_\_\_\_\_
- \_\_\_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_\_\_ Merger File \_\_\_\_\_
- \_\_\_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- \_\_\_\_\_ Cert. Copy \_\_\_\_\_
- \_\_\_\_\_ Photo Copy \_\_\_\_\_
- ☒ Certificate of Good Standing \_\_\_\_\_
- \_\_\_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_\_\_ Officer Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_\_\_ Driving Record \_\_\_\_\_
- \_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_\_\_ Courier \_\_\_\_\_

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: HARBOR OAKS HOMEOWNERS' ASSOCIATION, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

28 HARBOR OAKS CIRCLE

SAFETY HARBOR, FL 34695

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all legal purposes.

**ARTICLE IV SHARES**

The number of shares of stock is: 500

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

Name and Title: Chet Trotto, President + Director Name and Title: \_\_\_\_\_

Address 28 Harbor Oaks Circle Address: \_\_\_\_\_  
Safety Harbor, FL 34695

Name and Title: Mike Strout, VP + Director Name and Title: \_\_\_\_\_

Address @ Harbor Oaks Circle Address: \_\_\_\_\_  
Safety Harbor, FL 34695

Name and Title: Barry Tosdevine, Sec. + Director Name and Title: Arleen Cahenzli, Treas. + Director

Address 5 Harbor Point Place Address: 26 Harbor Oaks Circle  
Safety Harbor, FL 34695 Safety Harbor, FL  
34695

(cont.)

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Name and Title: \_\_\_\_\_ Name and Title: 2013 OCT 22 AM 8:02  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Scott Torrie, Esq.  
Address: 28471 U.S. Hwy 19 N., Ste. 505  
Clearwater, FL 33761

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: Scott Torrie, Esq.  
Address: 28471 U.S. Hwy 19 N., Ste. 505  
Clearwater, FL 33761

*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

10-22-13  
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

10-22-13  
Date