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WWS

4/23/15

COVER LETTER

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

SUBJECT: Flagship Productions 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: Bill Collins
Name (Printed or typed)

501 South Faulkenburg Rd. Suite A-2
Address

Tampa, FL 33619
City, State & Zip

813-410-0999
Daytime Telephone number

Seasaveyours.org
bill@seasaveyours.org
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: Flagship Productions Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

501 S. Faulkenburg Rd.
Suite A-2
Tampa, FL 33619

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To act as a publishing company
to write a free local paper and to distribute it to
a specified target market.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Crystal Colgrove/President Name and Title: _____

Address 501 S. Faulkenburg Rd. Address: _____
Suite A-2
Tampa, FL 33619

Name and Title: Anthony White VP Name and Title: _____

Address 501 S. Faulkenburg Rd. Address: _____
Suite A-2
Tampa, FL 33619

Name and Title: William Collier VP Name and Title: _____

Address 501 S. Faulkenburg Rd. Address: _____
Suite A-2
Tampa, FL 33619

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TAMPA FL 33619

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: William Collins

Address: 516 Clemens Rd.

Brandon, Fl. 33510

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Collins

Address: 516 Clemens Rd.

Brandon, Fl. 33510

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

William Collins
Required Signature/Registered Agent

4/20/2015
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.

William Collins
Required Signature/Incorporator

4/20/2015
Date