

P99000001685

TRANSMITTAL LETTER

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

SUBJECT: St Marys River Retreat, Inc.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing fee

\$78.75  
Filing Fee  
& Certificate

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee  
Certified Copy  
& Certificate

Additional Copy Required

RECEIVED  
JAN 7 2 31 PM '99

FROM: CLAUDE S. POPE  
Name (printed or typed)

RT. 4 BOX 8850  
Address

HILLIARD FL 32046  
City, State, & Zip

(904) 845-1328  
Daytime Telephone number

800002733008-75  
\*\*\*\*78.75 \*\*\*\*78.75  
-01/07/99-01029-017

FILED  
99 JAN -7 AM 11:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

will

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

**ARTICLES OF INCORPORATION**  
**OF**  
**ST. MARYS RIVER RETREAT, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

THE UNDERSIGNED INCORPORATOR OF THESE ARTICLES OF INCORPORATION IS A  
NATURAL PERSON COMPETENT TO CONTRACT AND HEREBY FORMS A CORPORATION  
FOR PROFIT UNDER THE GENERAL CORPORATION ACT AND OTHER LAWS OF THE STATE  
OF FLORIDA.

**ARTICLE I. NAME**

THE NAME OF THIS CORPORATON IS **ST. MARYS RIVER RETREAT, INC.**

**ARTICLE II. COMMENCEMENT**

THIS CORPORATON WILL EXIST EFFECTIVE JANUARY 1, 1999.

**ARTICLE III. DURATION**

THIS CORPORATION IS TO EXIST PERPETUALLY.

**ARTICLE IV. PURPOSE**

THIS CORPORATION IS ORGANIZED FOR THE PURPOSE OF TRANSACTING ANY OR ALL  
LAWFUL BUSINESS.

**ARTICLE V. CORPORATION POWERS**

THIS CORPORATION SHALL HAVE THE POWER TO DO ANYTHING NECESSARY AND  
PROPER FOR THE ACCOMPLISHMENT OR FURTHERANCE OF ANY PURPOSES OR OBJECTS  
OF THIS CORPORATION ENUMERATED IN THESE ARTICLES OF INCORPORATION, OR ANY  
AMENDMENT THEREOF, NECESSARY OR INCIDENTAL TO THE ACCOMPLISHMENT OR  
FURTHERANCE OF THE PURPOSES OR OBJECTS OF THIS CORPORATION AND TO HAVE, IN  
FURTHERANCE OF THE CORPORATE PURPOSE, ALL OF THE POWERS CONFERRED UPON  
CORPORATIONS ORGANIZED UNDER THE FLORIDA GENERAL CORPORATION ACT.

**ARTICLE VI. CAPITAL STOCK**

THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED

TO ISSUE IS 100 SHARES OF COMMON STOCK HAVING A PAR VALUE OF \$1.00 PER SHARE. THE BOARD OF DIRECTORS IS AUTHORIZED TO ISSUE "SECTION 1244 STOCK" AS DEFINED BY SECTION 1244 OF THE INTERNAL REVENUE CODE.

**ARTICLE VII. INITIAL PRINCIPAL OFFICE, REGISTERED OFFICE AND AGENT**

THE ADDRESS OF THE PRINCIPAL OFFICE OF THE CORPORATION IS **ROUTE 4 BOX 8850, HILLIARD, FL 32046**; AND THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS IS **CLAUDE S. POPE**. THE STOCKHOLDERS SHALL HAVE THE POWER TO ESTABLISH BRANCH OFFICES AND TO MOVE THE PRINCIPAL OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

**ARTICLE VIII. INCORPORATOR**

THE NAME AND ADDRESS OF THE PERSONS SIGNING THESE ARTICLES IS:

**CLAUDE S. POPE  
ROUTE 4 BOX 8850  
HILLIARD, FL 32046**

**ARTICLE IX. MANAGEMENT OF CORPORATION BY SHAREHOLDERS**

ALL CORPORATE POWERS SHALL BE EXERCISED BY OR UNDER THE AUTHORITY OF, AND THE BUSINESS AND AFFAIRS OF THIS CORPORATION SHALL BE MANAGED UNDER THE DIRECTION OF, THE SHARE HOLDERS OF THIS CORPORATION.

**ARTICLE X. CALLING OF SPECIAL MEETINGS**

SPECIAL MEETINGS OF SHAREHOLDERS OF THIS CORPORATION SHALL HAVE THE SOLE POWER TO ADOPT, AMEND OR REPEAL BY-LAWS FOR THE MANAGEMENT OF THIS CORPORATION, AND THE DUTIES OF THE OFFICERS SHALL BE PRESCRIBED BY SUCH BY-LAWS.

**ARTICLE XI. INITIAL DIRECTORS**

THE NAMES AND POST OFFICE ADDRESS OF THE MEMBERS OF THE FIRST BOARD OF DIRECTORS OF THIS CORPORATION ARE:

1-> **CLAUDE S. POPE  
ROUTE 4 BOX 8850  
HILLIARD, FL 32046**

**ARTICLE XII. INITIAL OFFICERS AND SUBSCRIBERS**

THE NAMES AND POST OFFICE ADDRESSES OF THE OFFICERS WHO ARE TO SERVE UNTIL THE FIRST ELECTION UNDER THE ARTICLES OF INCORPORATION ARE AS FOLLOWS:

**PRESIDENT: CLAUDE S. POPE  
ROUTE 4 BOX 8850  
HILLIARD, FL 32046**

**EXC. VICE PRESIDENT: A. JACK THOMAS**  
6757 YOWMANS CHAPEL RD.  
BLACKSHEAR, GA 31516

**VICE PRESIDENT: THOMAS E. KICKLIGHTER**  
5725 INDUSTRIAL BLVD.  
PATTERSON, GA 31557

**ARTICLE XIII AMENDMENT**

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY  
LAW.

IN WITNESS WHEREOF THE UNDERSIGNED SUBSCRIBER HAS EXECUTED THESE ARTICLES  
OF INCORPORATION ON JANUARY 1, 1999

  
CLAUDE S. POPE


STATE OF FLORIDA  
COUNTY OF NASSAU

I HEREBY CERTIFY THAT ON THIS DAY, BEFORE A NOTARY PUBLIC, DULY AUTHORIZED  
IN THE STATE AND COUNTY NAMED ABOVE TO TAKE ACKNOWLEDGEMENTS,  
PERSONALLY APPEARED **CLAUDE S. POPE** TO ME KNOWN AND KNOWN TO BE THE  
PERSON DESCRIBED AS THE PERSON WHO EXECUTED THE FOREGOING ARTICLES OF  
INCORPORATION AND ACKNOWLEDGED BEFORE ME THAT HE EXECUTED THE SAID  
ARTICLES OF INCORPORATION FOR THE USES AND PURPOSES THEREIN SET FORTH AND  
EXPRESSED.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND OFFICIAL SEAL AT  
Hilliard, FLORIDA, THIS 1ST DAY OF JANUARY 1999.



**G. M. FOUREAU**  
MY COMMISSION # CC 494033  
EXPIRES: September 7, 1999  
Bonded thru Notary Public Underwriters

  
NOTARY PUBLIC, STATE OF FLORIDA

MY COMMISSION EXPIRES: Sept 7, 1999

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the corporation is: ST. MARYS RIVER RETREAT, Inc.

2. The name and address of the registered agent and office is:

Claude S. Pope

(Name)

Rt. 4 Box 8850

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Hilliard, FL 32046

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Claude S. Pope  
(SIGNATURE)

JAN 1 1999  
(Date)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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