2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006
Secretary of State

DOCUMENT# 722095

Entity Name: ST. PHILIP EASTERN ORTHODOX CHURCH OF BROWARD COUNTY, INC.

Current Principal Place of Business:

4870 GRIFFIN ROAD
DAVIE, FL 33314 US

New Principal Place of Business:

Current Mailing Address:

4870 GRIFFIN ROAD
DAVIE, FL 33314 US

New Mailing Address:

FEI Number: 72-2095160 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SADAKA, NICHOLAS
8751 W. BROWARD BLVD., STE 106
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	SD	( ) Delete
Name:	ZAKAIB, SUE	
Address:	2214 NOVA VILLA DR	
City-St-Zip:	DAVIE, FL 33317	
Title:	PD	( ) Delete
Name:	SADAKA, NICHOLAS	
Address:	8751 W. BROWARD BLVD., STE 106	
City-St-Zip:	PLANTATION, FL 33324	
Title:	VP	( ) Delete
Name:	DORTA, DAVID	
Address:	15041 N SAXON CIRCLE	
City-St-Zip:	FORT LAUDERDALE, FL 33331	
Title:	T	( ) Delete
Name:	HOWARD, DONALD	
Address:	1740 E HALLANDALE BEACH BLVD	
City-St-Zip:	HALLANDALE, FL 33009	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD HOWARD T 01/17/2006

Electronic Signature of Signing Officer or Director — Date