## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#722095** 

FILED Jan 14, 2008 Secretary of State

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:			New Maili	New Mailing Address:		
4870 GRIFF DAVIE, FL						
FEI Number:	72-2095160	FEI Number Applied For ( ) FEI N	umber Not Appl	licable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
	IICHOLAS JNRISE BLVE DN, FL 33322					
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:						
	Electron	nic Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SD ( SADAKA, NICH 8551 W SUNR PLANTATION,	SE BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	DORTA, DAVID 15041 N SAXO		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VP ( HAYDAR, FAD 10111 SW 16 0 DAVIE, FL 333	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HADDAD, JAM 1015 AVIARY F		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: City-St-Zip:	VP ( ) Change (X) Addition HOWARD, DONALD C 10314 SW 23RD COURT DAVIE, FL 33324		

I hereby certify that the information supplied with this filing does not qualify 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 VP 01/14/2008