## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 22, 2008 **DOCUMENT# 722095** Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 

4870 GRIFFIN ROAD **DAVIE, FL 33314** 

**Current Mailing Address: New Mailing Address:** 

4870 GRIFFIN ROAD **DAVIE, FL 33314** US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SADAKA, NICHOLAS OZONE, NICHOLAS 8551 W. SUNRISE BLVD., STE 102 4870 GŔIFFIN ROAD PLANTATION, FL 33322 DAVIE, FL 33314

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: NICHOLAS OZONE 09/22/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SEC () Delete () Change () Addition GURREA, JULIO Name: Name:

4870 GRIFFIN ROAD Address: Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip:

Title: **PRES** () Delete Title: PRES (X) Change ( ) Addition HOWARD, DONALD C Name: RICHIE, BASIL Name:

Address: 10314 SW 23RD COURT Address: 4870 GRIFFIN ROAD City-St-Zip: **DAVIE, FL 33324** City-St-Zip: DAVIE, FL 33314

Title: TREA () Delete Title: **TREA** (X) Change ( ) Addition HAYDAR, FADY SEDAWIE, EDWARD Name: Name:

10111 SW 16 COURT Address: Address: 4870 GRIFFIN ROAD City-St-Zip: **DAVIE, FL 33324** City-St-Zip: **DAVIE. FL 33314** 

Title: VΡ () Delete Title: (X) Change ( ) Addition

Name: WARDELL, HARRY Name: KHOURY, SALIM 4870 GRIFFIN ROAD Address: 3770 OAKRIDGE LANE Address: City-St-Zip: WESTON, FL 33331 City-St-Zip: DAVID, FL 33314

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: DAVID DORTA **VP** 09/22/2008