2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State
04-27-2005 90276 045 ****61.25

14001706

DOCUMENT # 740142

1. Entity Name
UKRAINIAN UNITY OF ST. WLADYMIR, INC.

Principal Place of Business	Mailing Address
245 E LAKE MCCOY DR APOPKA, FL 32712	10 W NIGHTINGALE ST APOPKA, FL 32712

03172005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1784548 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WALTER, FICYK 327 EVERGREEN COURT APOPKA, FL 32712	Name MELESHKO, TAISSA Street Address (P.O. Box Number is Not Acceptable) 10 W. NIGHTINGALE ST. City APOPKA FL Zip Code 32712

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE TAISSA MELESHKO P 04-25-2005
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FICYK, WASYL 327 EVERGREEN CT APOPKA, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BEACH, HELENA 1054 LOTUS COVE # 645 ALTAMONTE SPRINGS, FL 32714	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SHEVCHENKO, ARTHUR 2018 WOODCREST CT WINTER PARK, FL 327925414	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MELESHKO, TAISSA 10 W NIGHTINGALE ST APOPKA, FL 32712	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PENIAK, MARIJKA 3855 HS WAY N PINELLAS PARK, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KOWEL, ANNA 1833 OLIVIA CIRCLE APOPKA, FL 32703	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KWASNYCKA, ANNA 321 LAKE MCCOY DR APOPKA, FL 32712	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MYCHALCEWYCZ, ROMAN 327 EVERGREEN CT. APOPKA, FL 32712	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Taissa Meleshko P April 25 2005 407-886-4803
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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