

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008184

FILED  
Jan 09, 2010  
Secretary of State

**Entity Name:** OREST AND LIDIA BILOUS FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

473 SOUTHCREEK DR  
OSPREY, FL 34229

**New Principal Place of Business:**

**Current Mailing Address:**

473 SOUTHCREEK DR  
OSPREY, FL 34229

**New Mailing Address:**

FEI Number: 65-1062193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BETTERTON, GREG A  
735 E. VENICE AVENUE  
SUITE 200  
VENICE, FL 34285 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: D  
Name: BETTERON, GREG A  
Address: 735 E. VENICE AVENUE  
City-St-Zip: VENICE, FL 34285

Title: D  
Name: BILOUS, OREST  
Address: 473 SOUTHCREEK DR  
City-St-Zip: OSPREY, FL 34229

Title: D  
Name: BILOUS, LIDIA M  
Address: 473 SOUTHCREEK DR  
City-St-Zip: OSPREY, FL 34229

Title: D  
Name: BILOUS, MICHAEL W  
Address: 7758 US OPEN LOOP  
City-St-Zip: BRADENTON, FL 34202

Title: D  
Name: BILOUS -OLEXY, ORESTA  
Address: 10 ASMARA WAY  
City-St-Zip: EASTON, CT 06612

Title: D  
Name: OLEXY, ANDRE  
Address: 10 ASMARA WAY  
City-St-Zip: EASTON, CT 06612

I hereby 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 all other like empowered.

SIGNATURE: OREST BILOUS

MR

01/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date