

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009421

FILED
Jan 20, 2009
Secretary of State

Entity Name: ST. PHILIP THE APOSTLE ORTHODOX CHURCH, INC.

Current Principal Place of Business:

9100 EL PORTAL DR.
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

3025 GEIGER CT.
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 35-2260735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELL, DEBRA J ESQ
200 MIRROR LAKE DR.
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

GELL, DEBRA J ESQ
6671 13TH AVE. N.
SUITE 1B
ST. PETERSBURG, FL 33710 US

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:

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CIARCIAGLINO, FR. JOSEPH M
Address: 3025 GEIGER CT.
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: FINZER, NICHOLAS
Address: 5860 CEDAR ST. NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: T () Delete
Name: FINZER, SUE
Address: 5860 CEDAR ST. NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: S () Delete
Name: KUNZ, KARLENE
Address: 3806 SUNNYBANK DR.
City-St-Zip: BRANDON, FL 33594

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ECENIA, TANDOVA
Address: 6010 N. ARMENIA AVE
City-St-Zip: TAMPA, FL 33604

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

Title: S (X) Change () Addition
Name: SCOTT, JULIE
Address: 6009 HAMMOCK HILL AVE.
City-St-Zip: LITHIA, FL 33547

Title: D () Change (X) Addition
Name: JOLLY, JAMES
Address: 4901 W. SAN JESSE ST.
City-St-Zip: TAMPA, FL 33629

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: JOSEPH CIARCIAGLINO

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date