

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N09433** (6)
1. Corporation Name
ST. MICHAEL EVANGELICAL ORTHODOX CHURCH, INC.



Principal Place of Business
**C/O REV. DR. ROBERT BOUCLAS
4414 WASHINGTON ROAD
WEST PALM BEACH FL 33405**

Mailing Address
**C/O REV. DR. ROBERT BOUCLAS
4414 WASHINGTON ROAD
WEST PALM BEACH FL 33405**

3. Date Incorporated or Qualified
05/23/1985

3a. Date of Last Report
05/01/1995

4. FEI Number
NOT APPLICABLE

Applied For
☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent

**BOUCLAS, REV. DR. ROBERT
4414 WASHINGTON ROAD
WEST PALM BEACH FL 33405**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent; and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
PD	BOUCLAS, REV. DR. ROBERT	4414 WASHINGTON RD.	W. PALM BEACH FL	
VD	TOBIN, REV. ANNE MARY	4414 WASHINGTON RD.	W. PALM BEACH FL	
VD	BOUCLAS, SAM	5942 CAYMAN CIRCLE W.	W. PALM BEACH FL	
STD	BOUCLAS, LOIS	4414 WASHINGTON RD.	W. PALM BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change	☐ Addition
1.1	1.2	1.3	1.4		
2.1	2.2	2.3	2.4		
3.1	3.2	3.3	3.4		
4.1	4.2	4.3	4.4		
5.1	5.2	5.3	5.4		
6.1	6.2	6.3	6.4		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)