2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# N10823

Entity Name: ST. NICHOLAS UKRAINIAN ORTHODOX CHURCH, INC.

Current Principal Place of Business:

ST. NICHOLAS CHURCH
5031 S.W. 100 AVE.
COOPER CITY, FL 33328

New Principal Place of Business:

Current Mailing Address:

5031 SW 100 AVE.
COOPER CITY, FL 33328 US

New Mailing Address:

FEI Number: 59-2114350 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUSAK, LEONID
1601 SW 106 TERR
DAVIE, FL 33324 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: PD ( ) Delete
Name: HUSAK, LEONID
Address: 1601 SW 106 TERR
City-St-Zip: DAVIE, FL 33324

Title: V ( ) Delete
Name: BOHDANIW, JOHN,
Address: 6608 NW 57 COURT
City-St-Zip: TAMARAC, FL

Title: D ( ) Delete
Name: JACIUK, ANATOL
Address: 1261 N HARBOR ST
City-St-Zip: RIVIERA BCH, FL

Title: D ( ) Delete
Name: FABEROWSKY, STEPAN,
Address: 2500 NE 22ND ST.
City-St-Zip: POMPANO BCH., FL

Title: SD ( ) Delete
Name: HODIVSKY, KATHERINE,
Address: 4100 N.58 AVE.,#102
City-St-Zip: HOLLYWOOD, FL

Title: T ( ) Delete
Name: SLUSARENKO, PETER,
Address: 9480 PONCIANA PL
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEONID HUSAK PD 04/25/2005

Electronic Signature of Signing Officer or Director Date