

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N93000003125 (2)**

1. Corporation Name

ST. ANNE ROMANIAN ORTHODOX CHURCH, INCORPORATED



Principal Place of Business

Mailing Address

4518 CLINTON AVE
JACKSONVILLE FL 32207-6859
US

P.O. BOX 24902
JACKSONVILLE FL 32241-4902

3. Date Incorporated or Qualified
07/12/1993

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
59-3198530

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SERBAN, JOHN
4766 DOVETAIL DRIVE EAST
JACKSONVILLE FL 32257-7616

81 Name **Same**
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

Same

Signature, typed or printed name of registered agent and (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATROI, GEORGE	1.2 NAME
STREET ADDRESS	BRANDY BRANCH RD., BOX 5123	1.3 STREET ADDRESS
CITY-ST-ZIP	BRYCEVILLE FL 32009	1.4 CITY-ST-ZIP
TITLE	DS	2.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUMITRI, LEOPOLDINA	2.2 NAME
STREET ADDRESS	6136 GEORGEWOOD LANE E	2.3 STREET ADDRESS
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP
TITLE	DT	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SERBAN, JOHN	3.2 NAME
STREET ADDRESS	4766 DOVETAIL DR. EAST	3.3 STREET ADDRESS
CITY-ST-ZIP	JACKSONVILLE FL 32257-7616	3.4 CITY-ST-ZIP
TITLE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP
TITLE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

Maria Cozma
7534 Old Kings Rd, S.
Jacksonville, FL 32217

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: **John Serban - John Serban 7-5-01-96 (904)-292-1458**
DATE: **7/5/96**

CR2E037 (12/95)