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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90104 050 \*\*\*\*61.25

0018042

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1. Corporation Name

SAINT JUDE MARONITE CATHOLIC CHURCH OF ORLANDO,  
INC.

Principal Place of Business  
6282 SANDCREST CIR  
ORLANDO FL 32819-7536

Mailing Address  
6282 SANDCREST CIR  
ORLANDO FL 32819-7536



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

12/27/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-3355985

Applied For

Not Applicable

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

Zip

Country

Zip

Country

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEBAILY, JOSEPH J  
111 NORTH ORANGE AVE  
#2050  
ORLANDO FL 32819

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME DOVEIHI, STEPHEN H BISHOP  
STREET ADDRESS 294 HOWARD AVE POB 010-360  
CITY-ST-ZIP STATEN ISLAND NY

1.1 TITLE ☐ Change ☐ Addition

TITLE SD ☐ DELETE

NAME ZINA, FATHER G  
STREET ADDRESS 6282 SANDCREST CIR  
CITY-ST-ZIP ORLANDO FL 32819

2.1 TITLE ☐ Change ☐ Addition

TITLE ATD ☐ DELETE

NAME JEBAILY, JOSEPH  
STREET ADDRESS 111 NORTH ORANGE AVE., #2050  
CITY-ST-ZIP ORLANDO FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

*Joseph J. Baily*  
DIRECTOR

4/26/99

407 420-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)