

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N96000000059

**FILED**  
**Jun 20, 2014**  
**Secretary of State**

**Entity Name:** SAINT JUDE MARONITE CATHOLIC CHURCH OF ORLANDO, INC.

**Current Principal Place of Business:**

5555 DR. PHILLIPS BLVD.  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

5555 DR. PHILLIPS BLVD.  
ORLANDO, FL 32819 US

**New Mailing Address:**

**FEI Number:** 59-3355985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAADE, BASSAM FATHER  
5555 DR PHILLIPS BLVD  
ORLANDO, FL 32819 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:** FATHER BASSAM SAADE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** MANSOUR, GREGORY J BISHOP  
**Address:** 109 REMSEN STREET  
**City-St-Zip:** BROOKLYN, NY 11201

**Title:** STD  
**Name:** SAADE, BASSAM FATHER  
**Address:** 5555 DR PHILLIPS BLVD  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** VPD  
**Name:** THOMAS, MICHAEL G  
**Address:** 109 REMSEN STREET  
**City-St-Zip:** BROOKLYN, NY 11201

I hereby 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 all other like empowered.

**SIGNATURE:** BISHOP GREGORY J. MANSOUR

PD

06/20/2014

Electronic Signature of Signing Officer or Director

Date