## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011044

Entity Name: HOLY PROTECTION OF THE THEOTOKOS ORTHODOX

MISSION, INC.

# **Current Principal Place of Business:**

1014 NORTH FORREST AVE KISSIMMEE, FL 34741

## **Current Mailing Address:**

1014 NORTH FORREST AVE KISSIMMEE, FL 34741 US

FEI Number: 51-0609891 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

RIOS, CARLOS A 1014 NORTH FORREST AVE KISSIMMEE, FL 34741 US

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

**FILED** Apr 29, 2016

**Secretary of State** 

CC6778225522

#### Officer/Director Detail:

Title Title VΡ

Name RIOS, CARLOS AREV.FR Name RIOS, CARLOS A

Address 1014 NORTH FORREST AVE Address 1014 NORTH FORREST AVE

City-State-Zip: KISSIMMEE FL 34741 City-State-Zip: KISSIMMEE FL 34741

**TREA** Title **SECR** Title

RIOS, CARLOS A Name RIOS, CARLOS AREV.FR. Name

Address 1014 NORTH FORREST AVE Address 1014 NORTH FORREST AVE

City-State-Zip: KISSIMMEE FL 34741 KISSIMMEE FL 34741 City-State-Zip:

Title **MEMB** Title MEMB

Name TURNER, YAHAIRA R Name PERALTA, LOYDA E

Address 1014 NORTH FORREST AVE 1014 NORTH FORREST AVE Address

City-State-Zip: KISSIMMEE FL 34741 KISSIMMEE FL 34741 City-State-Zip:

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: CARLOS A. RIOS

REVEREND FATHER

04/29/2016