## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08881

Entity Name: HOLY PROTECTION ORTHODOX CHURCH INC.

**Current Principal Place of Business:** 

3820 MOORES LAKE RD. DOVER, FL 33527

**Current Mailing Address:** 

3820 MOORES LAKE RD. DOVER, FL 33527

FEI Number: 59-2715568 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINSINBIGLER, HARRY L III 3820 MOORES LAKE RD DOVER, FL 33527 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: HARRY L LINSINBIGLER III 03/30/2017

Electronic Signature of Registered Agent

Date

**FILED** Mar 30, 2017

**Secretary of State** 

CC7574101207

Officer/Director Detail:

Title PARISH PRIEST, CHAIRMAN Title **PRESIDENT** 

LINSINBIGLER, HARRY L III GURSKY, BEVERLY Name Name

3820 MOORES LAKE RD. 3908 SOUTH NINE DRIVE Address Address

City-State-Zip: VALRICO FL 33596 DOVER FL 33527 City-State-Zip:

Title **SECRETARY** Title **TREASURER** Name BYCZ, LINDA Name REBECCA, DELP

Address 4524 ATWOOD DR. Address 3404 SILVER GLEN CT. ORLANDO FL 32828 City-State-Zip: City-State-Zip: PLANT CITY FL 33567

Title VΡ Title PRESBYTERA, ELDER

Name DELP, BRIAN CARRIE, LINSINBIGLER J Name

Address 3404 SILVER GLEN COURT 3820 MOORES LAKE ROAD Address

City-State-Zip: PLANT CITY FL 33567 City-State-Zip: DOVER FL 33527

Title ASST. TREASURER COLLINS, NANCY Name 254 21 TERRACE S.E. Address

City-State-Zip: LARGO FL 33771

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.

03/30/2017 SIGNATURE: HARRY L LINSINBIGLER III REGISTERED AGENT

Electronic Signature of Signing Officer/Director Detail

Date