

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08881

**FILED**  
**Feb 27, 2018**  
**Secretary of State**  
**CC6520578561**

**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

02/27/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PARISH PRIEST, CHAIRMAN  
Name LINSINBIGLER, HARRY L III  
Address 3820 MOORES LAKE RD.  
City-State-Zip: DOVER FL 33527

Title PRESIDENT  
Name GURSKY, BEVERLY  
Address 3908 SOUTH NINE DRIVE  
City-State-Zip: VALRICO FL 33596

Title VP  
Name DELP, BRIAN  
Address 3404 SILVER GLEN CT.  
City-State-Zip: PLANT CITY FL 33567

Title SECRETARY  
Name KARAGOUNIS, PAULA  
Address 3210 ASHMONTE DR.  
City-State-Zip: LAND O LAKES FL 34638

Title TREASURER  
Name DELP, REBECCA  
Address 3404 SILVER GLEN COURT  
City-State-Zip: PLANT CITY FL 33567

Title ASST. TREASURER  
Name COLLINS, NANCY  
Address 254 21 TERRACE S.E.  
City-State-Zip: LARGO FL 33771

Title ASST SECRETARY  
Name JOHNSON, SUSAN  
Address 5922 WRENWATER DRIVE  
City-State-Zip: LITHIA FL 33547

Title PRESBYTERA, ADMIN COORDINATOR  
Name LINSINBIGLER, CARRIE  
Address 3820 MOORES LAKE ROAD  
City-State-Zip: DOVER FL 33527

*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:** HARRY LINSINBIGLER

PARISH PRIEST

02/27/2018

Electronic Signature of Signing Officer/Director Detail

Date