Entity Name	# N10000003796 :: OUR LADY OF LEBANON MARONITE CA	THOLIC CHUR	CH, INC.	Secretary of State 7001078517CC
Current Prin 2055 CORAL W MIAMI, FL 331				100107051700
Current Mai	ling Address:			
2055 CORA MIAMI, FL				
FEI Number: 59-1829803			Certificate of Status Desired: Yes	
Name and A	ddress of Current Registered Agent:			
RAHMEH, MAN 2055 CORAL W MIAMI, FL 331	'AY			
The above name	I entity submits this statement for the purpose of changing its re	egistered office or regis	tered agent, or both, ir	n the State of Florida.
	, , , , , , , , , , , , , , , , , , , ,			
SIGNATURE	MANUEL RAHMEH		-	
SIGNATURE				
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent			02/14/2024
	Electronic Signature of Registered Agent	Title	VSD	02/14/2024
Officer/Dire	MANUEL RAHMEH Electronic Signature of Registered Agent ctor Detail :	Title Name	VSD THOMAS, MICHA	02/14/2024 Date
Officer/Dire	MANUEL RAHMEH Electronic Signature of Registered Agent Ctor Detail : PD			02/14/2024 Date
Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : PD MANSOUR, GREGORY J	Name	THOMAS, MICHA 109 REMSEN ST	02/14/2024 Date NEL G REET
Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : PD MANSOUR, GREGORY J 109 REMSEN STREET	Name Address	THOMAS, MICHA 109 REMSEN ST	02/14/2024 Date NEL G REET
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : PD MANSOUR, GREGORY J 109 REMSEN STREET BROOKLYN NY 11201	Name Address	THOMAS, MICHA 109 REMSEN ST	02/14/2024 Date NEL G REET
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : PD MANSOUR, GREGORY J 109 REMSEN STREET BROOKLYN NY 11201 TD	Name Address	THOMAS, MICHA 109 REMSEN ST	02/14/2024 Date NEL G REET
Officer/Dire Title Name Address City-State-Zip: Title Name	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PD MANSOUR, GREGORY J 109 REMSEN STREET BROOKLYN NY 11201 TD RAHMEH, MANUEL	Name Address	THOMAS, MICHA 109 REMSEN ST	02/14/2024 Date NEL G REET

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: FR MANUEL RAHMEH

Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1000003796

PASTOR

02/14/2024 Date

FILED Feb 14, 2024