

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10774

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC0718978265**

**Entity Name:** SOORP HAROUTIUN ARMENIAN CHURCH, INC

**Current Principal Place of Business:**

9274 WINTER GARDEN VINELAND RD  
ORLANDO, FL 32836

**Current Mailing Address:**

P.O. BOX 1242  
WINDERMERE, FL 34786 US

**FEI Number:** 59-3238620

**Certificate of Status Desired:** No

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

HARVEY, LUCINE M.  
9221 SABAL PALM CIR  
WINDERMERE, FL 34786 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

**Officer/Director Detail :**

Title CT  
Name HARVEY, LUCINE M  
Address P.O. BOX 1231 N/A  
City-State-Zip: WINDERMERE FL

Title SD  
Name NAZARIAN, ARAM  
Address 4700 LAKE SHARP DR  
City-State-Zip: ORLANDO FL

Title D  
Name BARGAMIAN, RICHARD  
Address 103 W. WHISPERING PINES CT.  
City-State-Zip: SANFORD FL 327732317

Title D  
Name TAKVORIAN, THEODOR S  
Address 115 DELLWOOD DR.  
City-State-Zip: LONGWOOD FL 32750

Title D  
Name TOUFAYAN, HARRY  
Address 3826 BRYN MAWR ST.  
City-State-Zip: ORLANDO, FL 32808

*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:** LUCINE M. HARVEY

CT

02/09/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date