

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000003467

**Entity Name:** THE SOCIETY OF NOVOE KITEZH, INC.

**Current Principal Place of Business:**

1121 PARK LANE  
HAVERHILL, FL 33417

**Current Mailing Address:**

1121 PARK LANE  
HAVERHILL, FL 33417 US

**FEI Number: 46-5362177**

**Certificate of Status Desired: No**

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

CASTILLO DE FUENTES, MIGUEL S  
1121 PARK LANE  
HAVERHILL, FL 33417 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            PRES  
Name            CASTILLO DE FUENTES, MIGUEL S  
Address        1121 PARK LANE  
City-State-Zip: HAVERHILL FL 33417

Title            VP  
Name            ALONSO, CLAUDIA  
Address        4337 LILAC CIRCLE  
City-State-Zip: LAKE WORTH FL 33461

Title            TREA  
Name            BIRR ZOUEFF, IVAN REV.  
Address        PAROISSE ORTHODOXE SAINT-MATTHIEU  
                 158 AV. CHARLES DE GAULLE  
City-State-Zip: NEUILLY-SUR-SEINE 92200

Title            SEC  
Name            KENCIS, ANDREW REV.  
Address        P.O. BOX 104  
City-State-Zip: WILDWOOD, AB T0E 2M0 00000

Title            OFC  
Name            GUSSAIDI, KHRISOSTOM REV.  
Address        4001 WEST EMPEDRADO STREET  
City-State-Zip: TAMPA FL 33629

Title            OFC  
Name            STURZA, ANDREI  
Address        AV. JEANNE 35/B004  
City-State-Zip: BRUXELLES 1000

*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: MIGUEL S. CASTILLO DE FUENTES**

**PRESIDENT**

**02/10/2024**

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

\_\_\_\_\_  
Date