

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000008506

Entity Name: OIKEOS CHRISTIAN NETWORK INC.

Current Principal Place of Business:

1900 HICKORY STREET, SUITE B
MELBOURNE, FL 32901

Current Mailing Address:

1900 HICKORY STREET, SUITE B
MELBOURNE, FL 32901 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARIAS BOSINGER, PLLC
1900 HICKORY STREET, SUITE B
MELBOURNE, FL 32901 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 D
Name CENCICH, TODD
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title P
Name MAGNELLI, RICO
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title D
Name FINLEY, VICTORIA
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title VP
Name RYAN, JON
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title D
Name KISH, JOHN
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title D
Name GRILLIOT, TODD
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title D
Name TILLMAN, KEN
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title D
Name BIDON, TED
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

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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: MAGNELLI , RICO

PRESIDENT

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name DILLON, KEVIN
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901

Title ST
Name KNUPP, TOM
Address 1900 HICKORY STREET, SUITE B
City-State-Zip: MELBOURNE FL 32901