

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000008506

FILED
Jan 27, 2023
Secretary of State
0880702960CC

Entity Name: OIKEOS CHRISTIAN NETWORK INC.

Current Principal Place of Business:

845 E. NEW HAVEN AVENUE
MELBOURNE, FL 32901

Current Mailing Address:

845 E. NEW HAVEN AVENUE
MELBOURNE, FL 32901 US

FEI Number: 83-1615220

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ARIAS BOSINGER, PLLC
845 E. NEW HAVEN AVENUE
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 DIRECTOR
Name CENCICH, TODD
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title PRESIDENT
Name MAGNELLI, RICO
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY
Name FINLEY, VICTORIA
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title VP
Name RYAN, JON
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name PATTERSON, JASON
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name GRILLIOT, TODD
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name TILLMAN, KEN
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name BIDON, TED
Address 845 E. NEW HAVEN AVENUE
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: FEDERICO MAGNELLI

PRESIDENT

01/27/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name FREDERICK, GARY
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name ONEAL, VERA
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title VP
Name KNUPP, TOM
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name BELTS, LAURETTA
Address 845 E. NEW HAVEN AVENUE
City-State-Zip: MELBOURNE FL 32901