

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000012149

**FILED**  
**Jan 21, 2020**  
**Secretary of State**  
**0165189832CC**

**Entity Name:** STS. CYRIL & METHODIUS BYZANTINE CATHOLIC CHURCH IN FORT PIERCE, INC.

**Current Principal Place of Business:**

1002 BAHAMA AVENUE  
FORT PIERCE, FL 34982-5818

**Current Mailing Address:**

1002 BAHAMA AVENUE  
FORT PIERCE, FL 34982-5818 US

**FEI Number: 01-0709896**

**Certificate of Status Desired: No**

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

HANINCIK, FRANK REV.  
7120 MASSACHUSETTS AVENUE  
NEW PORT RICHEY, FL 34653 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: REV. FRANK HANINCIK**

**01/21/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name BURNETTE, KURT BISHOP  
Address 445 LACKAWANNA AVE  
City-State-Zip: WOODLAND PARK NJ 07424

Title T  
Name HAYER, JAMES R. REV.  
Address 445 LACKAWANNA AVENUE  
City-State-Zip: WOODLAND PARK NJ 07424

Title T  
Name SHALHOUB, ROBERT J CFO  
Address 445 LACKAWANNA AVENUE  
City-State-Zip: WOODLAND PARK NJ 07424

Title T  
Name PERHACH, ANDREW  
Address 1002 BAHAMA AVENUE  
City-State-Zip: FORT PIERCE FL 34982-5818

Title T  
Name HENDRICKSON, KENNETH  
Address 1002 BAHAMA AVENUE  
City-State-Zip: FORT PIERCE FL 34982-5818

*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: ROBERT J SHALHOUB CPA**

**CFO**

**01/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date