## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 707719** 

FILED May 06, 2009 Secretary of State

Entity Name: ORTHODOX CHURCH OF THE HOLY TRINITY, INC.

Current Principal Place of Business: New Principal Place of Business:

3265 STATE RD 580 3265 STATE RD 580

SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695 US

Current Mailing Address: New Mailing Address:

3265 STATE RD 580 SAFETY HARBOR, FL 34695

FEI Number: 23-7216333 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TUTKO, PETER REV. GELL, DEBRA J ESQ

1004 GREENLEAF WAY

TARPON SPRINGS, FL 34689 US

6671 13TH AVE. N., SUITE 1B
ST PETERSBURG, FL 33710 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: DEBRA J. GELL, ESQ. 05/06/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: ST ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 KERR, ANDREA
 Name:
 WILLIAMS, JASON K

 Address:
 1683 CASTELWOOD LANE
 Address:
 3265 STATE RD 580

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: P ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 TUTKO, PETER REV.
 Name:
 AYOUB, IBRAHIM F

 Address:
 1004 GREENLEAF WAY
 Address:
 8806 CHESTERTON PLACE

 City-St-Zip:
 TARPON SPRINGS, FL 34689
 City-St-Zip:
 TAMPA, FL 33635 US

Title: D ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 SCHWARTZ, KIRK
 Name:
 DAMIANAKIS, ELIAS

 Address:
 3135 CHAPTER CLUB DR. E
 Address:
 6646 WALDORF CT

City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: NEW PORT RICHEY, FL 34655 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JASON KERRY WILLIAMS P 05/06/2009