

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718542

1. Entity Name

ORTHODOX CHURCH OF ST. STEPHEN THE PROTOMARTYR, INC.

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90065 019 ****61.25

Principal Place of Business

Mailing Address

1895 LAKE EMMA ROAD
LONGWOOD FL 32750
US

RTYR. INC.
10 MONROE AVE.
DEBARY FL 32713-3204

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1347112

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EALY, REV FR JOHN
10 MONROE AVE
DEBARY FL 32713

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Delete
NAME	EALY, JOHN (V. REV. FR.)	
STREET ADDRESS	10 MONROE AVENUE	
CITY-ST-ZIP	DEBARY FL	
TITLE	D	☐ Delete
NAME	JANIK, KENNETH	
STREET ADDRESS	2388 STARBOARD COVE	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	V	☒ Delete
NAME	VAN DEN BERG, ANN	
STREET ADDRESS	849 GREENS AVENUE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	S	☐ Delete
NAME	DAVID, ELAINE	
STREET ADDRESS	303 S DOVER CT	
CITY-ST-ZIP	HEATHROW FL	
TITLE	D	☐ Delete
NAME	KINDELL, ROBERT	
STREET ADDRESS	136 FIGTREE RUN	
CITY-ST-ZIP	LONGWOOD FL 32750	
TITLE	D	☐ Delete
NAME	GIDUS, PAUL	
STREET ADDRESS	2509 AZALEA DR	
CITY-ST-ZIP	ORLANDO FL	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	Gursky, Bart	
STREET ADDRESS	2410 Orchard Dr	
CITY-ST-ZIP	Apopka, FL 32712	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Rev Fr John Ealy 01/22/02 386-668-6020

CR2E037 (9/01)