

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718542

FILED  
Apr 07, 2008  
Secretary of State

Entity Name: ORTHODOX CHURCH OF ST. STEPHEN THE PROTOMARTYR, INC.

**Current Principal Place of Business:**

1895 LAKE EMMA ROAD  
LONGWOOD, FL 32750 US

**New Principal Place of Business:**

**Current Mailing Address:**

4586 REDMOND PLACE  
SANFORD, FL 32771 US

**New Mailing Address:**

FEI Number: 59-1347112

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEVENS, MARK A REV  
4586 REDMOND PLACE  
SANFORD, FL 32771 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: STEVENS, MARK A REV  
Address: 4586 REDMOND PLACE  
City-St-Zip: SANFORD, FL 32771 US

Title: T ( ) Delete  
Name: JANIK, KENNETH  
Address: 2388 STARBOARD COVE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: D ( ) Delete  
Name: VAN DEN BERG, ANNE  
Address: 849 GREENS AVENUE  
City-St-Zip: ORLANDO, FL 32804 US

Title: S ( ) Delete  
Name: MUELLER, ELAINE  
Address: 349 WOLDUNN CIRCLE  
City-St-Zip: LAKE MARY, FL 32746 US

Title: D ( ) Delete  
Name: DRAGASH, JEANA  
Address: 1357 RICHMOND ROAD  
City-St-Zip: WINTER PARK, FL 32792 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: CHANCY, GLEN  
Address: 1936 OLIVIA CIRCLE  
City-St-Zip: APOPKA, FL 32703 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: STEPHENSON, HELEN  
Address: 200 NORTH THISTLE LANE  
City-St-Zip: MAITLAND, FL 32751 US

Title: D (X) Change ( ) Addition  
Name: CONCELMAN, SCOTT  
Address: 435 WEKIVA PRESERVE DRIVE  
City-St-Zip: APOPKA, FL 32712 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: MARK A. STEVENS

P

04/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date