FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sendre B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

723695

(3)

MAGYAR PRESBYTERIAN CHURCH, INC.							
Principal Place of Business Mailing Address							
1703 SYLVESTO LAKELAND FL US		1703 SYLVESTER ROAD LAKELAND FL 33803-0541				3. Date Incorporated or Qualified 06/16/1972 4. FEI Number Applied For S9-2255629 Not Applicab	
21	ace of Business	2s. Mailing Address 26				5. Certificate of Status Desired \$8.75 Additional Fee Required	10
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
City & State		City & State				7. Is this nonprofit corporation a homeowners association? Ves No	
Zip 24	Country 25	Z ip 29	Cou 30	Country 0		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current Registered					10. Name and Address of New Registered Agent	ヿ
				81 N	lame		
KIRALY, ZOLTAN REV. 1703 SYLVESTER ROAD				82 Street Address (P.O. Box Number is Not Acceptable)			ᅱ
	ND FL 33803 -0041 -			83			
				84 C	City	FL 85 Zip Code 33603 354	
11. Pursuant office or re	to the provisions of Sections 617.0502 egistered agent, or both, in the State of	and 617.1508, Florida Statute I Florida, Such change was au	s, the at	bove-na	amed corpo e corporatio	oration submits this statement for the purpose of changing its registere on's board of directors. I hereby accept the appointment as registered	8
SIGNATURE	m familiar with, and accept the obligat						_
Signature typed or printed name of registered agent and little if applicable (NOT 12. OFFICERS AND DIRECTORS				Registered Agent signature requi		d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T OFFICERS AND	DELETE		1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	on .
NAME	FEJES, ELIZABETH	vector		1.2 NAME			"
STREET ADDRESS	1408 GRAND CAYMAN			1.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER HAVEN FL		1.4 CITY - ST		I		
TITLE	D	DELETE		2.1 TITLE		☐ Change ☐ Addition	on
NAME	GULYAS, IMRE		2.2 NA	AME			
STREET ADDRESS	2021 KAPREE COURT		2.3 STREET ADDRESS		PRESS		
CITY-ST-ZIP	WINTER HAVEN FL		2.4 C	2. 4 CITY - ST - ZIP			
TITLE	\$	☐ DÉLETE	3.1 TIT			☐ Change ☐ Addition	on
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4. CITY-ST-ZIP		☐ Change ☐ Additi	OD.
TITLE	<u> </u>	L. VELETE	,			T custifie T would	"
NAME OTDEET ADDRESS	FEJES, JOSEPH 1408 GRAND CAYMAN		4. 2 NAME 4.3 STREET		var.cc		
STREET ADDRESS	WINTER HAVEN FL		4.4 CITY				1
CITY-ST-ZIP TITLE	S S	DELETE	5.1 TO		<u> </u>	☐ Change ☐ Addition	on
NAME	HAGGERTY, BETTY		5.2 NA			Land Controlled Contro	
STREET ADDRESS			5.3 STREET ADDRESS		RESS		- 1
CITY-ST-ZIP	LAKELAND FL			TY-ST-Z			- 1
TITLE		☐ DELETE	6.1 Tt1			Change Addition	on
NAME			6.2 NA				ŀ
STREET ADDRESS				FREET ADE	RESS		
CITY-ST-ZIP				TY - ST - 7	l l		1

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Betty Haggerty 1-23-98

JRZE037 (1097

FILED

Mar 06 1998 8:00am

Secretary of State