

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736619

FILED
Jan 04, 2012
Secretary of State

Entity Name: HOLY CROSS ORTHODOX CHURCH, INC.

Current Principal Place of Business:

2365 S OLGA DR SE
FT MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

3704 SE 12TH CT.
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 59-2070980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALCESKI, LEONID REV.
3704 S.E. 12TH CT.
CAPE CORAL, FL 33904 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: CM
Name: LORI, JOSEPH
Address: 16624 CAMELIA DR.
City-St-Zip: FORT MYERS, FL 33908

Title: FS
Name: CASEY, JULIANA I
Address: 1323 SE 37TH LN
City-St-Zip: CAPE CORAL, FL 33904

Title: P
Name: FORSTER, ROBERT
Address: 2632 SW 46TH ST
City-St-Zip: CAPE CORAL, FL 33914

Title: D
Name: PALCESKI, V. REV. LEONID
Address: 3704 SE 12TH CT.
City-St-Zip: CAPE CORAL, FL 33904

Title: VP
Name: GALA, JOHN
Address: 1309 NE 21ST PLACE
City-St-Zip: CAPE CORAL, FL 33909

Title: S
Name: KUKUY, NATALIA
Address: 4702 SW 24TH AVE
City-St-Zip: CAPE CORAL, FL 33914

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: JULIANA CASEY

FS

01/04/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date