

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 743530

1. Entity Name

CARDINAL MINDSZENTY SOCIETY OF FLORIDA, INC.

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90453 031 ****61.25

Principal Place of Business

546 RUTH STREET
PORT ORANGE FL 32127
US

Mailing Address

546 RUTH STREET
PORT ORANGE FL 32127
US

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

NOT APPLICABLE

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

HORVATH, MICHAEL J DR.
546 RUTH ST
PORT ORANGE FL 32127

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 PD
NAME BARDOS, ANDREW
STREET ADDRESS 107 WINDWARD WAY
CITY-ST-ZIP INDIAN HARBOUR BEACH FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME PAZMADY-HORVATH, MARGARE
STREET ADDRESS 546 RUTH ST.
CITY-ST-ZIP PORT ORANGE FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME HORVATH, MICHAEL J.
STREET ADDRESS 546 RUTH ST.
CITY-ST-ZIP PORT ORANGE FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME GOMBOS, GEORGE
STREET ADDRESS 942 LANTERND
CITY-ST-ZIP S. DAYTONA FL 32119 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME KOPEL, KALMAN Papp Alex.
STREET ADDRESS 406 VENTURA DR. 4 Ocean W. Blvd., #2068
CITY-ST-ZIP SANFORD FL 32711 Daytona Beach Shores, FL 32118

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME KOPEL, ELIZABETI Ipolyi George
STREET ADDRESS 406 VENTURA DR. 6 Montauk Ct.,
CITY-ST-ZIP SANFORD FL 32711 Palm Coast, FL 32164

TITLE
NAME ☐ Change ☐ Addition
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: Michael J. Horvath MICHAEL J. HORVATH EXEC. SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)