


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90105 004 ****61.25

DOCUMENT # 744725 1. Entity Name THE ORTHODOX CHURCH OF SAINT ANDREW THE APOSTLE, INC.					
Principal Place of Business 2815 SOUTH BAY STREET EUSTIS FL 32726			Mailing Address 2815 SOUTH BAY STREET EUSTIS FL 32726		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-1850254	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DUNLOP, KENNETH E 37208 OAK LANE UMATILLA FL 32784			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State			
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 </div> </div>					
TITLE	D STEBBINS, AMBER <input type="checkbox"/> Delete 13518 BISCAYNE DRIVE GRAND ISLAND FL 32735	TITLE	S HODGE, JOSEPH <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5770 VALERIAN BLVD. ORLANDO FL 32819		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	C <input type="checkbox"/> Delete DUNLOP, KENNETH E 37208 OAK LANE UMATILLA FL 32784	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	D <input checked="" type="checkbox"/> Delete MILNER, JEAN 1921 ARBOR WAY MOUNT DORA FL 32757	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	TD <input type="checkbox"/> Delete HAYS, BARBARA 241 NORTH HILL AVE. DELAND FL 32724	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete SCHWALB, DAVID 407 SASSAFRAS LANE MOUNT DORA FL 32757	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	PD <input type="checkbox"/> Delete HUTCHESON, NUPERN 11251 LAKE CIRCLE CLERMONT FL 34711	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition HUTCHESON, NUBERN 9895 SE 310TH AVENUE ALTOONA FL 32702		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		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: Barbara S. Hays **Barbara S. Hays** **4-17-04** **352-352-1549**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2004 UNIFORM BUSINESS REPORT (UBR)

Attachment

Attachment

440 33698

DOCUMENT # 744725

1. Entity Name

THE ORTHODOX CHURCH OF SAINT ANDREW THE APOSTLE,

Principal Place of Business

Mailing Address

2815 SOUTH BAY STREET
EUSTIS FL 32726

2815 SOUTH BAY STREET
EUSTIS FL 32726

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1850254

Applied For

Not Applicable

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PIERCE, MICHAEL 2343 WESTLAND ROAD MOUNT DORA FL 32757 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALBRIGHT, CONSTANCE 36800 LAKE NORRIS ROAD EUSTIS FL 32726 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENGELHARD, GEORGE 9223 SILVER LAKE DRIVE LEESBURG FL 34788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CP2E037 (5/00)

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SIGNATURE: