FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #
1. Corporation Name

(4)

FILED Jan 24 1997 8:00am Secretary of State

HOLY THEOTOKOS MONASTERY, INC. Principal Place of Business Mailing Address									
111 EVERGREE		111 EVERGREEN ROAD NORTH FORT MYERS FL	33903-383	30					
						3. Date Incorporated or Qualified 06/08/1979	3a. Da	te of Lat 02/21,	st Report 1996
2. Principal Place of Business 2a. Mailing Address					··· · · · · · · · · · · · · · · · · ·	4. FEI Number		T	Applied For
26						59-1927843			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired	S8.75 Additional Fee Required		
City & Stat	te	City & State				6. Election Campaign Financing	\$5.00 May Be		
23] Zip	Country	Z ip	Cou	untry	,	Trust Fund Contribution 8. This corporation has liability for			
24	25	29	30	a.,,,, y			Triangible ☐ Yes [91 8. 199.032,
<u></u>	9. Name and Address of Curre		100	Τ-		10. Name and Address of New Re			
				81	Name		- X		
KERR, MARK (FATHER)					Charat Arts	ess (P.O. Box Number is Not Acceptable)			
111 EVERGREEN ROAD				62	ON REI WOO	льее (г.О. вох ічиновя із ічої Ассеріа	uid)		
	T MYERS FL 33903-3830			83					
.,				84	City			85 2	Zip Code
				}	,	rporation submits this statement for the ation's board of directors. I hereby acce	FL	1 1	•
12.	Signature typed or printed name of registered ag OFFICERS AN	gent and little if applicable (NO ND DIRECTORS	TE: Registere	ed Age	ent signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIREC	TORS IN 12
TITLE	PO	DELETE	1.1 T	TLE				Char	ge Addition
NAME	LEWIS, JOHN R (FATHER)		1.2 N	AME	į				
STREET ADDRESS	111 EVERGREEN ROAD		1.3 S	TREET	T ADDRESS				
CITY-ST-ZIP	N FORT MYERS FL				ST - ZIP			— .	
TITLE	TSD	☐ DELETE	2.1 TITLE					Char	ge L Addition
NAME	KERR, MARK R (FATHER)		2.2 N						
STREET ADDRESS	111 EVERGREEN ROAD N FORT MYERS FL		- 1		T ADORESS				
CITY-ST-ZIP TITLE	D N FORT MIERO FL	DELETE	2.40 3.1 T		ST-ZIP			Char	ge Addition
NAME	TOWNSEND, GEORGE J (FA	_ =	3.2 N		1				
STREET ADDRESS	111 EVERGREEN ROAD	****			T ADDRESS				
CITY-ST-ZIP	N FORT MYERS FL		1		ST-ZIP				
TITLE		DELETE	4.1 T	_				Char	ge Addition
NAME			4.21	NAME					
STREET ADDRESS	ł		4.3 5	TAEET	T ADDRESS				
CITY-ST-ZIP			4.4 0	HY-5	ST-ZIP				
TITLE		DELETE	5.11	ITLE				Char	ge 🔲 Addition
NAME			5.2 N	IAME					•
STREET ADDRESS			5.3.9	TREE	T ADDRESS				
CITY-ST-ZIP					ST-ZIP			17.0	nge Addition
TITLE	1	DELETE	6.11	TITE .	1				no illadulion
NAME		DECETE.						Char	ing The programme
		L Piccia	6.2 N	IAME	1			L CHAI	ige L. Aberron
STREET ADDRESS		_ vicin	6.2 M 6.3 S	IAME Stree	T AODRESS ST-ZIP			L. UNA	ilda 🗀 Muscon

14. I do 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.