2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2005
Secretary of State

DOCUMENT# 747549

Entity Name: HOLY THEOTOKOS MONASTERY, INC.

Current Principal Place of Business:

111 EVERGREEN ROAD
NORTH FORT MYERS, FL 339033830

New Principal Place of Business:

Current Mailing Address:

4181 SILVER SWORD COURT
NORTH FORT MYERS, FL 339033859

New Mailing Address:

FEI Number: 59-1927843 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICHOLAS, ANDREA D MOTHER
1340 PINEY RD
N FORT MYERS, FL 33903 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: PD ( ) Delete
Name: LEWIS, JOHN R FATHER
Address: 4181 SILVER SWORD COURT
City-St-Zip: NORTH FORT MYERS, FL 339033859

Title: TSD ( ) Delete
Name: NICHOLAS, ANDREA D MOTHER
Address: 1340 PINEY RD
City-St-Zip: N FORT MYERS, FL 339033822

Title: DD ( ) Delete
Name: DAVIS, WILLIAM R JR
Address: 1642 PALM LANE
City-St-Zip: LABELLE, FL 339356624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: FATHER JOHN R. LEWIS PD 01/15/2005

Electronic Signature of Signing Officer or Director Date