

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748005

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: ST. DAVID ARMENIAN CHURCH, INC.

**Current Principal Place of Business:**

2300 YAMATO RD.  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

2300 YAMATO RD.  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 59-1918817

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MELKONIAN, ARMEN  
2891 NW 28TERR  
BOCA RATON, FL 33434 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: CT ( ) Delete  
Name: MELKONIAN, ARMEN  
Address: 2891 NW 28 TERR  
City-St-Zip: BOCA RATON, FL 33428

Title: T ( ) Delete  
Name: MACARION, EDDI  
Address: 5278 NW 112 TERR  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VCS ( ) Delete  
Name: MENCIA, ROSEMARY  
Address: 10 SENECA ROAD  
City-St-Zip: SEA BRANCH, FL 33308

Title: S ( ) Delete  
Name: SARIAN, CLAUDETTE  
Address: 21742 CONTADO RD  
City-St-Zip: BOCA RATON, FL 33434

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CT (X) Change ( ) Addition  
Name: SARIAN, CLAUDETTE  
Address: 21742 CONTADO ROAD  
City-St-Zip: BOCA RATON, FL 33433

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

Title: VCS (X) Change ( ) Addition  
Name: LUSARARIAN, BERJOHI  
Address: 1150 HILLSBORO MILE, #303  
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: S (X) Change ( ) Addition  
Name: STAPAN, NINA  
Address: 6915 N.W. 3RD AVENUE  
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CLAUDETTE SARIAN

CT

03/16/2009

Electronic Signature of Signing Officer or Director

Date