FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 08 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

770857

(1)

	ARY'S UKRANIAN CATHOLIC	` '							
Principal Piace	e of Business	Mailing Address			- 1 FBB187 18451 [BB18 BB30] \$0.001 B1114 1		ARI AKOKI BIBIL DI	8) 019 1841	
C/O REV. MATTHEW BERKO 245 LAKE MCCOY DRIVE APOPKA FL 32712 US		C/O MATTHEW BERCO 20 EAST MIGHTINGALE STREET APOPKA FL 32712-2710			3. Date Incorporated or Qualified 10/20/1983	3 a. D	ate of Last R 05/01/199	eporl	
8 57 1 15									
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number 59-2371348			oplied For ot Applicable	
Suite, Apt.	#, e1c.	Suite, Apt #, etc.					\$8.75 A	`	
22		27			5. Certificate of Status Desired		Fee Re		
City & State	9	City & State			6. Election Campaign Financing		\$5.00		
Z ip	Country	28	Count	rs/		1rust Fund Contribution		Added t	
24	25	29 30		Zouritry		8. This corporation has liability for in Florida Statutes		tax under s. No	199.032,
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered	Agent	
			8	1 Na	me				
BERKO, MATTHEW REV.			6:	2 Str	et Addre	Address (P.O. Box Number is Not Acceptable)			
20 EAST NIGHTINGALE ST. APOPKA FL 32712			8	83					
AFORM	(FL 32/ 12								
			8	 				85 Zip (Dode
11. Pursuant office or reagent. La	to the provisions of Sections 617.050/ egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 617.1508, Florida Statule of Florida. Such change was a tions of, Section 617.0503, Flo	es, the abo authorized b orida Statut	ve-nan by the es.	ned corpo corporation	oration submits this statement for the pon's board of directors. I hereby accep	surpose o	f changing its pointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registered agen	n) and itin if annicable (NOT)	- ficulstanad A	noni s'on	alute femire	d when reinstating)	DATE		
12.	OFFICERS AND			atim s a	mare 160016	ADDITIONS/CHANGES TO OFFICE		DIRECTOR	S IN 12
TITLE	PD	DELETE	1.1 THLE					☐ Change	Addition
NAME	BERKO, MATTHEW REV.		1.2 NAME						
STREET ADDRESS	20 E. NIGHTINGALE ST.	T. Carlotte and the second		1.3 STREET ADDRESS					أ
CITY-ST-ZIP TITLE	APOPKA FL 32712 VD	DELETE	1.4 CITY- 2.1 TITLE					Change	Addition
NAME	FICYK, WASYL		2.2 NAME					ondaige	roution
STREET ADDRESS	327 EVERGREEN CT.		2.3 STRE		SS				
CITY-ST-ZIP	APOPKA FL 32712	FL 32712 2.		- S1-21P					
TOTLE	D COMOTOROUGA OFFICE	DELFTE	3.1 TH LE					☐ Change	Addition
NAME	KONOTOPSKY, GENE 2710 HAGEN COURT		3.2 NAME						
STREET ADDRESS	LONGWOOD FL		3.3 STRE		SS				
TITLE	8	☐ DELETE	3.4. CITY 4.1 TITLE					Change	☐ Addition
NAME	MARIJKA, PENIAK	_	4. 2 NAM						
STREET ADDRESS	9 W. NIGHTINGALE STREET		4.3 STREE	1 ADDRE	ss				
CITY-ST-ZIP	APOPKA FL 32712	·	4.4 CITY-						
TITLE	ILEMENA TORM	DELETE	51 TITLE		ŀ			Change	Addition
NAME	ILEMSKY, JOHN 956 FOUNTAINHEAD DR.		5.2 NAME		00				
STREET ADDRESS	DELTONA FL		5.3 STREE		92				ŀ
CITY-ST-ZIP TITLE	D	DELETE	6.1 TITLE				·	Change	Addition
NAME	BALANETZKY, JOHN		6.2 NAME					*	
STREET ADDRESS	332 COUNTRY LANDING BLD	G	6.3 STREE	1 ADDRE	ss				
OITY CT. 71D	APOPKA FI		EA DITY	67 7LD					

14. 1 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 roport 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.