

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 28, 2009
Secretary of State

DOCUMENT# N00000007996

Entity Name: THE ROMANIAN ORTHODOX CHURCH - ARCHANGELS MICHAEL AND GABRIEL, INC.**Current Principal Place of Business:**1809 SHEELER RD.
APOPKA, FL 32703**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 391003
DELTONA, FL 32739**New Mailing Address:****FEI Number:** 59-3697418**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**GHICA, DANIEL
2561 DERBY DRIVE
DELTONA, FL 32738 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:** P () Delete
Name: GEORGE, GATA
Address: 2325 SUNSET AVE.
City-St-Zip: INDIALANTIC, FL 32903 US**Title:** S () Delete
Name: ANA MARIA, CODREANU
Address: 452 CASA MARINA PL.
City-St-Zip: SANFORD, FL 32771 US**Title:** T () Delete
Name: VALENTINA, PUSCUTA
Address: 227 BLUE STONE CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: COHANOSCHI, ION
Address: 3217 BELLINGHAM DRIVE
City-St-Zip: ORLANDO, FL 32825 US**Title:** VP (X) Change () Addition
Name: OMAT, DOMNICA
Address: 13805 BELLES LN
City-St-Zip: ORLANDO, FL 32826 US**Title:** T (X) Change () Addition
Name: MANCAS, CIPRIAN S
Address: 300 E SOUTH ST UNIT 5003
City-St-Zip: ORLANDO, FL 32801 US

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: STEFAN MANCAS

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09/28/2009

Electronic Signature of Signing Officer or Director

Date