

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2008 8:00 am
Secretary of State

04-08-2008 90016 035 ****70.00

DOCUMENT # N01000002097	
1. Entity Name SAINT ANTHONY THE GREAT ORTHODOX CHURCH, INC.	

Principal Place of Business 4031 US 1 DIXIE HIGHWAY PALM BAY FL 32905	Mailing Address 4031 US 1 DIXIE HIGHWAY PALM BAY FL 32905
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40062210



2. Principal Place of Business - No P.O. Box # 2600 Aurora Rd.	3. Mailing Address 1010 George St.
Suite, Apt. #, etc. STE P	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State Melbourne, FL	City & State Sebastian, FL
Zip 32935	Zip 32958
Country Brevard	Country

4. FEI Number 59-3692285	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent OSTERMAN, PETER F 1010 GEORGE ST SEBASTIAN FL 32958	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Peter F. Osterman DATE 3/23/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PT	☒ Delete	TITLE VPD	☒ Change ☐ Addition
NAME OSTERMAN, PETER F		NAME Osterman, Peter F.	
STREET ADDRESS 1010 GEORGE ST		STREET ADDRESS 1010 George St	
CITY-ST-ZIP SEBASTIAN FL 32958		CITY-ST-ZIP Sebastian, FL 32958	
TITLE VPD	☒ Delete	TITLE C/P	☐ Change ☒ Addition
NAME NAJJAR, JEAN		NAME Flickinger, Robert	
STREET ADDRESS 535 MAJORCA CRT		STREET ADDRESS 438 Chaloupe Ter.	
CITY-ST-ZIP SATELLITE BEACH FL 32937		CITY-ST-ZIP Sebastian, FL 32958	
TITLE SD	☐ Delete	TITLE T/P	☐ Change ☒ Addition
NAME PERERS, SUSAN		NAME Cannaverde, Fred	
STREET ADDRESS 5985 S. TROPICAL TRAIL		STREET ADDRESS 1379 Russin Cir SE	
CITY-ST-ZIP MERRIT ISLAND FL 32952		CITY-ST-ZIP Palm Bay, FL 32909	
TITLE D	☒ Delete	TITLE VP	☒ Change ☐ Addition
NAME SMITH, PATRICIA		NAME Smith, Patricia	
STREET ADDRESS 4005 DAVID DR		STREET ADDRESS 4005 David Dr	
CITY-ST-ZIP TITUSVILLE FL 32780		CITY-ST-ZIP Titusville, FL 32780	
TITLE	☐ Delete	TITLE D	☒ Change ☐ Addition
NAME		NAME Najjar, Jean	
STREET ADDRESS		STREET ADDRESS 535 Majorca Ct	
CITY-ST-ZIP		CITY-ST-ZIP Satellite Beach, FL 32937	
TITLE	☐ Delete	TITLE P	☐ Change ☒ Addition
NAME		NAME Conway, William	
STREET ADDRESS		STREET ADDRESS 5335 Tay Ct.	
CITY-ST-ZIP		CITY-ST-ZIP Melbourne Beach, FL 32951	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE [Signature] DATE 3/24/08 321-726-7017

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR