




# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2004 8:00 am**  
**Secretary of State**

04-23-2004 90237 001 \*\*\*\*61.25

<b>DOCUMENT # N02000001332</b> 1. Entity Name <b>SYRO-CHALDEAN EASTERN CATHOLIC CHURCH, U.S.A., INC.</b>					
Principal Place of Business 1900 SW 35TH AVE FORT LAUDERDALE, FL 33312				Mailing Address 2125 W. DAVIE BOULEVARD #108 FORT LAUDERDALE, FL 33312	
2. Principal Place of Business		3. Mailing Address <b>2123 W. Davie Blvd.</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>#105</b>			
City & State		City & State <b>Ft. Lauderdale, FL</b>			
Zip	Country	Zip <b>33312</b>	Country <b>Broward</b>	4. FEI Number <b>65-1147881</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>KNOX, M. REV. BRUCE A</b> <b>2125 W. DAVIE BOULEVARD</b> <b>#108</b> <b>FORT LAUDERDALE, FL 33312</b>				7. Name and Address of New Registered Agent Name <b>Knox, M. Rev. Bruce A</b> Street Address (P.O. Box Number is Not Acceptable) <b>2123 W. Davie Blvd., #105</b> City <b>Ft. Lauderdale</b> FL Zip Code <b>33312</b>	
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  <b>+ Bruce A. J. Knox</b> <b>4-20-04</b> <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when registering) DATE</small>					
<b>Filing Fee is \$81.25</b> <b>Due by May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNOX, MOST REV. BRUCE A 2125 W. DAVIE BOULEVARD, #108 FORT LAUDERDALE, FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>Heather Patricelli</b> <b>2117 W. Davie Blvd. #121</b> <b>Ft Lauderdale, FL 33312</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LAMBERT, MOST REV. PAUL 48 RUTLAND LANE BOYNTON BEACH, FL 33436	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V.</b> <b>Lambert, Most Rev. Paul</b> <b>5800 NE 22 Way, # 592</b> <b>Ft. Lauderdale, FL 33308</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PIRO, REV. FR. DOMINIC 2119 W. DAVIE BOULEVARD, #227 FORT LAUDERDALE, FL 33312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BROWN, ANTOINETTE 2220 N 57 TERRACE HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WALE, MEOGREGOR 2400 W BROWARD BLVD, LOT 701 FORT LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
12. I 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 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:  <b>Most Rev. Bruce A. Knox</b> <b>4/20/04</b> <b>954-612-4841</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					