

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2003 8:00 am
Secretary of State

0015639

DOCUMENT # N02000001436

1. Entity Name

NEW LIFE SLAVIC CHURCH INC.



Principal Place of Business

1112 SOUTH CHAMBERLAIN BLVD.
NORTH PORT FL 34286

Mailing Address

1112 SOUTH CHAMBERLAIN BLVD.
NORTH PORT FL 34286

2. Principal Place of Business

3. Mailing Address

1112 S Chamberlain blvd

Suite, Apt. #, etc.

1112 S Chamberlain blvd

Suite, Apt. #, etc.

North Port, FL

City & State

North Port, FL

City & State

Zip 34286

Country USA

Zip 34286

Country USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

75-3003177

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUBNOV, ALEKSANDR M
1112 SOUTH CHAMBERLAIN BLVD.
NORTH PORT FL 34286

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME BUBNOV, ALEKSANDR
STREET ADDRESS 1112 SOUTH CHAMBERLAIN BLVD.
CITY-ST-ZIP NORTH PORT, FL 34286 ☐ Delete

TITLE V
NAME GASHCHENKO, FILIPP
STREET ADDRESS 3079 NORTH SALFORD BLVD.
CITY-ST-ZIP NORTH PORT-FL 34286 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T
NAME Maksimov Aleksey
STREET ADDRESS 1758 Bushnell ave
CITY-ST-ZIP North Port, FL 34286 ☐ Change ☒ Addition

TITLE T
NAME Ilykhvar Raisa
STREET ADDRESS 2443 Yancy st
CITY-ST-ZIP North Port, FL 34287 ☐ Change ☒ Addition

TITLE T
NAME Vasilchuk Petr
STREET ADDRESS 3342 Talinton ave
CITY-ST-ZIP North Port, FL 34286 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED Bubnov Aleksandr 07/22/03 (941) 426-0038

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)