

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009554

FILED  
Mar 06, 2007  
Secretary of State

Entity Name: ST. SIMON THE TANNER COPTIC ORTHODOX CHURCH, INC.

**Current Principal Place of Business:**

3924 MEADOW CREEK LANE  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

10005 OASIS PALM DR  
TAMPA, FL 33615

**New Mailing Address:**

FEI Number: 43-1990629

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SALEH, MOUSSA  
10005 OASIS PALM DR  
TAMPA, FL 33615 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: PD ( ) Delete  
Name: SALEH, FR. MOUSSA  
Address: 10005 OASIS PALM DR  
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete  
Name: MANSOUR, GEORGE  
Address: 3924 MEADOW CREEK LANE  
City-St-Zip: SARASOTA, FL 34233

Title: PD ( ) Delete  
Name: HIS GRACE, BISHOP YAUSSY  
Address: 1110 JOHN MCCAID RD.  
City-St-Zip: COLLEYVILLE, TX 76034

Title: TD ( ) Delete  
Name: IBRAHIM, GAMILA  
Address: 501 REMBRAND DR  
City-St-Zip: OSPREY, FL 34229

Title: JD ( ) Delete  
Name: FN. MOUSSA, SALEH  
Address: 10005 OASIS PALM DR.  
City-St-Zip: TAMPA, FL 33615

Title: SD ( ) Delete  
Name: MAUSOUR, GEORGE  
Address: 4899 PENEGRINE PT. CIR E  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GAMILA IBRAHIM

TD

03/06/2007

Electronic Signature of Signing Officer or Director

Date