

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000313

FILED
Mar 13, 2007
Secretary of State

Entity Name: ST. REBEKAH COPTIC ORTHODOX CHURCH, INC.

Current Principal Place of Business:

P.O. BOX 690035
ORLANDO, FL 328690035

New Principal Place of Business:

7102 WINDING LAKE CIR
OVIEDO, FL 32765

Current Mailing Address:

P.O. BOX 690035
ORLANDO, FL 328690035

New Mailing Address:

FEI Number: 01-0767063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALLEENY, R. SHENOUDA
7102 WINDING LAKE CIR
OVIEDO, FL 32765 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: D () Delete
Name: SAKLA, EMAD
Address: 4932 SOLIMARTIN DR.
City-St-Zip: ORLANDO, FL 32837

Title: T () Delete
Name: AZER, SAMIR
Address: 3600 BEECH TREE
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: MENIAN, EFFAT
Address: 13011 ISLAMORADA DR.
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: MIKHAEL, MIKHAEL
Address: 4832 OAK PROMENADE LN
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: BEDROS, MEDHAT
Address: 6397 MIRAMONT D # 105
City-St-Zip: ORLANDO, FL 32835

Title: S () Delete
Name: BOULOS, IHAB
Address: 9653 PORTOFINO DR
City-St-Zip: ORLANDO, FL 32832

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
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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: FR. SHENDOUDA KALLEENY

D

03/13/2007

Electronic Signature of Signing Officer or Director

Date