

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # N03000000596</b> 1. Entity Name <b>UKRAINIAN CHRISTIAN CHURCH OF EVANGELICAL FAITH, INC.</b>						<b>FILED</b> <b>05 FEB 18 PM 12: 23</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>4682 40TH AVE. N. ST. PETERSBURG, FL 33714</b>				Mailing Address <b>4682 40TH AVE. N. ST. PETERSBURG, FL 33714</b>			
2. Principal Place of Business <b>1390 SUNSET POINT RD. → SAME</b>				3. Mailing Address <b>SAME</b>			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State <b>CLEARWATER</b>				City & State			
Zip <b>33755</b>		Country		Zip		Country	
6. Name and Address of Current Registered Agent  <b>KUSHNIR NIKOLAY 4682 40TH AVE. N. ST. PETERSBURG, FL 33714</b>				7. Name and Address of New Registered Agent Name <b>NIKOLAY KUSHNIR</b> Street Address (P.O. Box Number is Not Acceptable) <b>1390 SUNSET POINT RD</b> City <b>CLEARWATER FL</b> Zip Code <b>33755</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 <u>Nikolay Kushnir</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				<b>NIKOLAY KUSHNIR REG. AGENT</b>		<b>2/15/05</b> <small>DATE</small>	
<b>FILE NOW!!! FEE IS \$122.50</b>				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to <b>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	D <input type="checkbox"/> Delete <b>KUSHNIR, NIKOLAY 6411 67TH AVE. N. PINELLAS PARK, FL 33781</b>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>OREST ZAJAC 5858 DARRIN CT. CLEARWATER, FL 33760</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>IZVUK, GRIGORII 4349 68TH AVE. N. PINELLAS PARK, FL 33781</b>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete <b>YAVNY HRYHORY 4848 163RD AVE. N. CLEARWATER, FL 33762</b>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>600047508026 03/01/05--01052--008 **122.50</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>PANOCHKO, STEPAN 2501 HARN BLVD., APT. H-12 CLEARWATER, FL 33764</b>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>KUSHNIR, MIKHAIL 2092 DAWN DR. CLEARWATER, FL 33763</b>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Nikolay Kushnir</u> <small>SIGNATURE AND TYPED OR-PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<b>NIKOLAY KUSHNIR PRES.</b>		<b>2/15/05 727-947-9275</b> <small>Date Daytime Phone #</small>	