

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008138

FILED
Jan 15, 2004
Secretary of State**Entity Name:** SAINT JOHN'S ORTHODOX CATHOLIC CHURCH OF FLROIDA, INC.**Current Principal Place of Business:**519 4TH AVE S
ST PETERSBURG, FL 33701**New Principal Place of Business:****Current Mailing Address:**519 4TH AVE S
ST PETERSBURG, FL 33701**New Mailing Address:****FEI Number:** 31-1393725**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**RAHDERT, GEORGE K
535 CENTRAL AVE
ST PETERSBURG, FL 33701 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: DP () Delete
Name: GOSINSKI, ALEX
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: DS () Delete
Name: COLVIN, ALEX
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: DT () Delete
Name: CAMPAGNA, DAVID
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change () Addition
Name: GOSINSKI, ALEX MR.
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: CEO (X) Change () Addition
Name: COLVIN, SCM, ALEX MR.
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: DT (X) Change () Addition
Name: CAMPAGNA, DAVID MR.
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: DIR () Change (X) Addition
Name: WINTERS, OCCA, JOSHUA FR.
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: DIR () Change (X) Addition
Name: CHAMBERS, LARRY MR.
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

Title: DIR () Change (X) Addition
Name: MANLEY, RUSSEL BR.
Address: 519 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33701

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALEX COLVIN, SCM

MR.

01/15/2004

Electronic Signature of Signing Officer or Director

Date