

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001834

FILED
Mar 28, 2006
Secretary of State

Entity Name: UKRAINIAN PENTECOSTAL CHURCH OF CHRISTIANS OF EVANGELICAL FAITH, INC

Current Principal Place of Business:

TRINITY UNITED METHODIST CHURCH
4285 WESLEY LN
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

SLAV TKACH
1709 KEYWAY RD
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 20-3243136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TKACH, SLAV
1709 KEYWAY RD
ENGLEWOOD, FL 34223 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: P () Delete
Name: FILIPOV, MYKOLA
Address: 1689 TRIPOLI STREET
City-St-Zip: NORTH PORT, FL 34286

Title: S () Delete
Name: TKACH, SLAV
Address: 1709 KEYWAY RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: T () Delete
Name: PARAMUSHCHAK, ROMAN
Address: 7548 JOPPA STREET
City-St-Zip: NORTH PORT, FL 34287

Title: M () Delete
Name: ZAYETS, VASYL
Address: 8407 LA BOCA AVE
City-St-Zip: NORTH PORT, FL 34287

Title: M () Delete
Name: MELNIK, ANDRIY
Address: 3036 SPICE LN
City-St-Zip: NORTH PORT, FL 34286

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: SLAV TKACH

SECR

03/28/2006

Electronic Signature of Signing Officer or Director

Date