

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# N05542

Entity Name: SAINT MARY AND ARCHANGEL MICHAEL COPTIC ORTHODOX CHURCH, INC. OF CENTRAL FLORIDA

Current Principal Place of Business:

1980 N. SR 426
OVIDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 621209
OVIDO, FL 327621209

New Mailing Address:

FEI Number: 59-2636210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORGAN, NABIL F
1128 NEEDLEWOOD LOOP
OVIDO, 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: VPD () Delete
Name: SHENOUDA, KALLEENY F
Address: 1980 N SR 426
City-St-Zip: OVIDO, FL 32765

Title: VPD () Delete
Name: TAWADROUS, DAOUD N FR
Address: 1016 KERWOOD CIRCLE
City-St-Zip: OVIDO, FL 32765

Title: D () Delete
Name: MANSOUR, OLFAT
Address: 2978 WILLOW BAY TER
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: IBRAHIM, HAZEM
Address: 935 EKANA GREEN CT
City-St-Zip: OVIDO, FL 32765

Title: D () Delete
Name: MIKHAEL, WASFY B
Address: 1010 ANTELOPE TRL
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: NAGIB, YAGOUB
Address: 1730 MARKHAM GLEN CIRCLE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: SHENOUDA, KALLEENY F
Address: 7102 WINDING LAKE CIR
City-St-Zip: OVIDO, FL 32765

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

Title: TD (X) Change () Addition
Name: NABIL, MORGAN F
Address: 1128 NEEDLEWOOD LOOP
City-St-Zip: OVIDO, FL 32765

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 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: NABIL F. MORGAN

TD

04/25/2009

Electronic Signature of Signing Officer or Director

_____ Date