

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006790

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: DIOCESE OF FLORIDA HOLY ORTHODOX CHURCH AJ, INC.

**Current Principal Place of Business:**

310 SW RANGE AVE  
MADISON, FL 32340

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 128  
MADISON, FL 32341

**New Mailing Address:**

FEI Number: 33-1140062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARTHOLOMEW, CARL D BISHOP  
184 SW ORANGE AVE  
MADISON, FL 32340 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: TS ( ) Delete  
Name: BARTHOMEW, CARL D  
Address: 184 SW ORANGE AVE  
City-St-Zip: MADISON, FL 32340

Title: D ( ) Delete  
Name: HUTH, SSB, DOUGLAS W  
Address: PO BOX 2595  
City-St-Zip: HENDERSONVILLE, NC 28793

Title: V ( ) Delete  
Name: FORBES, FRANCIS W SR.  
Address: 238 OVERBY DR.  
City-St-Zip: ANTIOCH, TN 37013

Title: D ( ) Delete  
Name: DIETZ, JOHN  
Address: 132 MARINE DR  
City-St-Zip: AMHERST, NY 14228

Title: D (X) Delete  
Name: DIETZ, MARRISA  
Address: 132 MARINE DR.  
City-St-Zip: AMHERST, NY 14228

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/T (X) Change ( ) Addition  
Name: BARTHOMEW, CARL D  
Address: 184 SW ORANGE AVE  
City-St-Zip: MADISON, FL 32340

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

Title: V (X) Change ( ) Addition  
Name: LONGACRE, JAY  
Address: 2306 GULL LANE  
City-St-Zip: SARASOTA, FL 34237

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: CARL D BARTHOLOMEW

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date