

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012321

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** HOLY EASTERN ORTHODOX CATHOLIC & APOSTOLIC CHURCH IN N. AMERICA, INC.

**Current Principal Place of Business:**

310 SW RANGE AVE.  
MADISON, FL 32340 01

**New Principal Place of Business:**

3611 SW 34TH. ST.  
32  
GAINESVILLE, FL 32608

**Current Mailing Address:**

PO BOX 128  
MADISON, FL 32341 01

**New Mailing Address:**

PO BOX 140666  
GAINESVILLE, FL 32614 06

**FEI Number:** 33-1204290

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARTHOLOMEW, ALEXANDER C ARCHBIS  
310 SW RANGE AVE.  
MADISON, FL 32341 US

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

BARTHOLOMEW, ALEXANDER C ARCHBIS  
3611 SW 34TH. ST.  
32  
GAINESVILLE, FL 32608 US

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:

04/27/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P,T  
Name: BARTHOLOMEW, DD, SSB, +ALEXANDER C MP  
Address: PO BOX 140666  
City-St-Zip: GAINESVILLE, FL 32614 US

Title: D  
Name: BOYLE-PARSLEY, DD, +NICHOLAS W ARCHBIS  
Address: 355 TUSCULUM RD.  
City-St-Zip: NASHVILLE, TN 37211 US

Title: D  
Name: PAYNE, SSB, FRANCIS-MARY T BISHOP  
Address: 1598 SW MAIN ST.  
City-St-Zip: GREENVILLE, FL 32331 US

I hereby 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 all other like empowered.

SIGNATURE: ARCHBISHOP ALEXANDER CD BARTHOLOMEW, SSB MP

04/27/2011

Electronic Signature of Signing Officer or Director

Date