2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009100

FILED Mar 16, 2009 Secretary of State

Entity Name: SAINT ANDREW THE APOSTLE ROMANIAN ORTHODOX CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 13460 OLYMPIC VILLAGE LANE BROOKSVILLE, FL 34614 **Current Mailing Address: New Mailing Address:** PO BOX 711 BROOKSVILLE, FL 34605 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEAGU, VASILE M REV ST. ANDREW THE APOSTLE ROMANIAN ORTHODOX 13460 OLYMPIC VILLAGE LANE 13460 OLYMPIC VILLAGE LANE BROOKSVILLE, FL 34614 BROOKSVILLE, FL 34614 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: NICOLAE TALPA 03/16/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TALPA, NICOLAE Name: Name: 12279 PONCE DE LEON BLVD Address: Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: Title: SD Title: (X) Change () Addition () Delete SD TALPA, MIHAI Name: ONETZ, GABRIELA Name: Address: 25183 CAMP CASTLE RD Address: 143 FAIRMONT DR. City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: SPRING HILL, FL 34609 Title: () Delete Title: () Change () Addition CIRLIG, MARIA Name: Name: 12196 PONCE DE LEON BLVD Address: Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: Title: TD () Delete Title: TD (X) Change () Addition Name: GHERCIA, VALERIA Name: ONETZ, JOHN 25215 CAMP CASTLE RD 143 FAIRMONT DR Address: Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: SPRING HILL, FL 34609 Title: () Delete Title: (X) Change () Addition LONG, CLAUDIA LASCU, MARIA Name: Name: 25232 CELMAR ST 6920 TIERRA LINDA Address: Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: PORT RICHEY, FL 34668

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: NICOLAE TALPA PD 03/16/2009