

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09433

FILED  
Jan 13, 2007  
Secretary of State

Entity Name: ST. MICHAEL EVANGELICAL ORTHODOX CHURCH, INC.

**Current Principal Place of Business:**

C/O REV. DR. ROBERT BOUCLAS  
4414 WASHINGTON ROAD  
WEST PALM BEACH, FL 33405

**New Principal Place of Business:**

**Current Mailing Address:**

C/O REV. DR. ROBERT BOUCLAS  
4414 WASHINGTON ROAD  
WEST PALM BEACH, FL 33405

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

BOUCLAS, REV. DR. ROBERT  
4414 WASHINGTON ROAD  
WEST PALM BEACH, FL 33405 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: PD ( ) Delete  
Name: BOUCLAS, REV. DR. ROBE, RT  
Address: 4414 WASHINGTON RD.  
City-St-Zip: W. PALM BEACH, FL

Title: VD ( ) Delete  
Name: REV. ANNE MARY VESEY,  
Address: 4414 WASHINGTON RD.  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: STD ( ) Delete  
Name: BOUCLAS, LOIS,  
Address: 4414 WASHINGTON RD.  
City-St-Zip: W. PALM BEACH, FL

Title: VD ( ) Delete  
Name: REV. FR. AL MAEYENS,  
Address: 11566 WINCHESTER DR  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VD ( ) Delete  
Name: SAM BOUCLAS,  
Address: 323 KIRK ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406

**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: REV. ANNE MARY VESEY

VD

01/13/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date