

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18239

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: SAINT NICHOLAS ANTIOCHIAN ORTHODOX CHURCH OF PINELLAS PARK, FLORIDA, INC.

**Current Principal Place of Business:**

6447 76TH AVE  
PINELLAS PARK, FL 33781 US

**New Principal Place of Business:**

**Current Mailing Address:**

6447 76TH AVE  
PINELLAS PARK, FL 33781 US

**New Mailing Address:**

FEI Number: 59-3168195      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BOSTLEY, ROBERT A  
11167 129TH AVE  
LARGO, FL 33778 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: WIGGINS, ROBERT E  
Address: 801 WEST BAY DRIVE SUITE 801  
City-St-Zip: LARGO, FL 33770 US

Title: VPD ( ) Delete  
Name: NASSIF, MATTHEW  
Address: 8405  
City-St-Zip: LAVA PLACE, FL 33615 US

Title: TSD ( ) Delete  
Name: BOSTLEY, ROBERT A  
Address: 11167 129TH AVE  
City-St-Zip: LARGO, FL 33778 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

Title: SD (X) Change ( ) Addition  
Name: MACLAURY, KATHRYN  
Address: 6800 PARK ST. S, #403  
City-St-Zip: ST. PETERSBURG, FL 33707 US

Title: TD ( ) Change (X) Addition  
Name: JACOB, MICHAEL  
Address: 1001 41ST. AVE.NE  
City-St-Zip: ST. PETERSBURG, FL 33703

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: KATHRYN MACLAURY

SD

04/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date