

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28088

FILED
Aug 02, 2006
Secretary of State

Entity Name: THE HOLY SPIRIT ORTHODOX CHURCH, INC.

Current Principal Place of Business:

700 SHAMROCK BLVD
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

700 SHAMROCK BLVD
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 65-0082873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BANYASZ, REV. FR. BASIL
20131 SEAGROVE #401
NAPLES, FL 33928 US

Name and Address of New Registered Agent:

MORRIS, LYNNE
4717 BONITA RD
VENICE, FL 34293 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: LYNNE MORRIS

08/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MR () Delete
Name: MOUSSA, MITRI
Address: 255 GRANDENIA DR
City-St-Zip: VENICE, FL 33595

Title: MRS () Delete
Name: JACOBS, AURELIA
Address: 620 GRANADA AVE
City-St-Zip: VENICE, FL 34285

Title: MR () Delete
Name: JACOBS, GEORGE
Address: 620 GRANADA AVE
City-St-Zip: VENICE, FL 34285

Title: MISS (X) Delete
Name: DUBINKA, SOPHIA
Address: 203 SILVER LAKE RD
City-St-Zip: VENICE, FL 34287

Title: MR (X) Delete
Name: JAMA, ALEX
Address: 991 POSADES EAST
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS (X) Change () Addition
Name: DEMIS, NICHOLAS
Address: 415 BECKLEY DR
City-St-Zip: VENICE, FL 34293

Title: MR (X) Change () Addition
Name: JACOBS, GEORGE
Address: 620 GRANADA AVE
City-St-Zip: VENICE, FL 34285

Title: MS (X) Change () Addition
Name: LYNNE, MORRIS M
Address: 4717 BONITA RD
City-St-Zip: VENICE, FL 34293

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: LYNNE M MORRIS

MS

08/02/2006

Electronic Signature of Signing Officer or Director

Date