

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 18, 2009  
Secretary of State**

DOCUMENT# N34557

Entity Name: ST. MARY AND ST. MINA COPTIC ORTHODOX CHURCH, INC.

**Current Principal Place of Business:**

2930 CR. 193  
CLEARWATER, FL 33759 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 17566  
CLEARWATER, FL 33762

**New Mailing Address:**

FEI Number: 59-2964992      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MAKAR, FR. KYRILLOS  
2930 CR. 193  
CLEARWATER, FL 33759 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: D ( ) Delete  
Name: MAKAR, KYRILLOS  
Address: 2930 CR 193  
City-St-Zip: CLEARWATER, FL 33759

Title: D ( ) Delete  
Name: AWAD, TONY S  
Address: 2043 DIAMOND CR  
City-St-Zip: OLDSMAR, FL 34677 US

Title: D ( ) Delete  
Name: HANNA, RAIFAT  
Address: 8001 MERRIMOOR BV  
City-St-Zip: LARGO, FL 33777

Title: DS ( ) Delete  
Name: HANNAH, HANNAH  
Address: 8523 HEYWARD RD  
City-St-Zip: TAMPA, FL 33635

Title: DT ( ) Delete  
Name: HEINEN, MORCOS A.  
Address: 9715 FRED ST  
City-St-Zip: HUDSON, FL 34669

Title: D ( ) Delete  
Name: BISHAY, ADEL  
Address: 6156 OSPRAY POINT  
City-St-Zip: SPRING HILL, FL 34607

**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:

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

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: MORCOS A. HEINEN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TREA

01/18/2009

\_\_\_\_\_  
Date