

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35457

FILED
Apr 19, 2011
Secretary of State

Entity Name: SAINT MARY AND SAINT GEORGE COPTIC ORTHODOX CHURCH, INC.

Current Principal Place of Business:

4279 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

4279 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-3002219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DR. MAGDI SOLIMAN
7829 PRESERVATION ROAD
TALLAHASSEE, FL 32312 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: P
Name: YOUSSEF, BISHOP HG
Address: 1110 JOHN MC CAIN ROAD
City-St-Zip: COLLEYVILLE, TX 76034

Title: DV
Name: GERGES, GERGES FR
Address: 6567 MONTROSE TRAIL
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: DT
Name: SOLIMAN, MAGDI DR.
Address: 7829 PRESERVATION ROAD.
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: DS
Name: SOLIMAN, KARAM DR.
Address: 5358 PEMBRIDGE PLACE
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: M
Name: BISHOY, RAGHEB
Address: 3531 GARDENVIEW WAY
City-St-Zip: TALLAHASSEE, FL 32309 US

I hereby 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 all other like empowered.

SIGNATURE: MAGDI SOLIMAN

DT

04/19/2011

Electronic Signature of Signing Officer or Director

Date