## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N43198

**FILED** May 03, 2007 Secretary of State

Entity Name: UKRAINIAN AUTOCEPHALOUS NATIONAL ORTHODOX CHURCH OF AMERICA AND EUROPE,

BLESSINGS OF KIEV, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

1411 NURSERY RD

CLEARWATER, FL 33756 US

**Current Mailing Address: New Mailing Address:** 

1411 NURSERY RD

CLEARWATER, FL 33756 US

FEI Number: 31-1662340 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

PACE, RONALD K ARCH 1411 NURSEY RD

CLEARWATER, FL 33756 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

PACE, RONALD K Name: Name: 1411 NURSERY RD Address: Address: City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip:

Title: VD () Delete Title: VD (X) Change ( ) Addition

CASS, WILLIAM Name: SMYZER, ROGER Name: Address: 11790 68TH AVENUE NORTH Address: 250 SIESTA LANE City-St-Zip: SEMINOLE, FL City-St-Zip: LARGO, FL 33770 US

Title: VD. () Delete Title: (X) Change ( ) Addition

PACE, ROSALIE J MURRAY, MARY C Name: Name: 1411 NURSERY RD Address: Address: 795 CR 1 #131

City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: PALM HARBOR, FL 34685 US

Title: () Delete Title: D (X) Change ( ) Addition

Name: PAUL, WALTER Name: POIRIER, ARMAND R 1535 NURSERY RD., APT. 304 Address: Address: 10794 118 ST

City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: SEMINOLE, FL 33778 US

Title: () Delete Title: ( ) Change (X) Addition

POIRIER, JEANNE C Name: Name: 10784 118 ST Address: Address:

SEMINOLE, FL 33778 US City-St-Zip: 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: RONALD K. PACE ARCH PD 05/03/2007