

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46269

FILED
Jan 03, 2006
Secretary of State

Entity Name: ONE HOLY CATHOLIC AND APOSTOLIC ORTHODOX CHURCH, CORP.

Current Principal Place of Business:

1116 SE 32ND STREET
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

1116 SE 32ND STREET
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 65-0301738 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SPYROU, CONSTANTINE A.
1116 SE 32ND STREET
CAPE CORAL, FL 33904 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: SPYROU, CONSTANTINE ARCHBSH
Address: 1116 SE 32ND STREET
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VD () Delete
Name: ORJUELA, ALBERTO L
Address: CUCUTA
City-St-Zip: NORTE DE SANTANDER, COLOMBIA, US

Title: D () Delete
Name: VERA, J M M
Address: VILLA ROSARIO CUCUTA
City-St-Zip: NORTE DE SANTANDER, COLOMBIA, US

Title: TD () Delete
Name: VASQUES, ROSEMARIE N
Address: 1116 SE 32ND STREET
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: CASTRO, VICTORINO
Address: CAMOAPA
City-St-Zip: NICARAGUA, US

Title: SD () Delete
Name: VASQUES, ROSEMARIE S
Address: 1116 SE 32ND STREET
City-St-Zip: CAPE CORAL, FL 33904 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: ORJUELA, ALBERTO L
Address: CUCUTA
City-St-Zip: NORTE DE SANTANDER, CO

Title: D (X) Change () Addition
Name: VERA, J M M
Address: VILLA ROSARIO CUCUTA
City-St-Zip: NORTE DE SANTANDER, CO

Title: TD (X) Change () Addition
Name: VASQUES, ROSEMARIE N
Address: 1116 SE 32ND STREET
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D (X) Change () Addition
Name: CASTRO, VICTORINO P
Address: CAMOAPA
City-St-Zip: LEON NICARAGUA, MI

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: ROSEMARIE N. VASQUES

TD

01/03/2006

Electronic Signature of Signing Officer or Director

Date