

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001044

FILED
Jun 26, 2009
Secretary of State

Entity Name: HUNGARIAN CHRISTIAN SOCIETY INC.

Current Principal Place of Business:

165 JACKSON RD
VENICE, FL 34292

New Principal Place of Business:

Current Mailing Address:

7061 S. TAMIAMI TRAIL
SUITE 204
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 65-0398671 **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:

Name and Address of New Registered Agent:

GARDI, LES
7061 S. TAMIAMI TRAIL
SUITE 204
SARASOTA, FL 34231 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:

Title: P () Delete
Name: POPITY, ELISABETH
Address: 1722 VIRGINIA ST.
City-St-Zip: NORTH PORT, FL 34287

Title: TD (X) Delete
Name: PINGICZER, KRISTINA
Address: 482 LOMOND DR
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D () Delete
Name: GARDI, LES CPA
Address: 7061 C S. TAMIAMI TR
City-St-Zip: SARASOTA, FL 34231

Title: T () Delete
Name: SZANTI, SUSAN
Address: 8182 INDIGO RIDGE TER.
City-St-Zip: SARASOTA, FL 34201

Title: VP () Delete
Name: GARDI, JOHN
Address: 3534 E. FOREST LAKE DR.
City-St-Zip: SARASOTA, FL 34232

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:

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: ELISABETH POPITY

P

06/26/2009

Electronic Signature of Signing Officer or Director

Date