

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005374

FILED
Apr 30, 2009
Secretary of State

Entity Name: FIRST SLAVIC PENTECOSTAL INC.

Current Principal Place of Business:

5848 TROPICAIRE BLVD.
NORTH PORT, FL 34286 US

New Principal Place of Business:

Current Mailing Address:

5848 TROPICAIRE BLVD.
NORTH PORT, FL 34286 US

New Mailing Address:

FEI Number: 65-0461288 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOYCHUK, MIRON
3792 SUBURBAN LANE
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

BOYCHUK, MIROSLAV
3792 SUBURBAN LANE
NORTH PORT, FL 34287 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: MIROSLAV BOYCHUK

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: MAKSIMCHUK, VASILYI
Address: 11925 ALLYON DR.
City-St-Zip: NORTH PORT, FL 34287 US

Title: T () Delete
Name: DZHUGA, NIKOLAY JR
Address: 12322 TANGIER ST.
City-St-Zip: NORTH PORT, FL 34287 US

Title: T () Delete
Name: SIMONTCHIK, VICTOR
Address: 2676 GISELA RD
City-St-Zip: NORTH PORT, FL 34287

Title: T () Delete
Name: BOHDANETS, ANATOLIY
Address: 4850 LIBBY ST
City-St-Zip: NORTH PORT, FL 34287 US

Title: T () Delete
Name: HROSHEV, YURIY
Address: 4213 GROBE ST
City-St-Zip: NORTH PORT, FL 34287

Title: T () Delete
Name: TUR, VICTOR
Address: 1794 GREENHILL AVE
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: KAMINSKIY, VICTOR
Address: 3906 PINSTAR TER.
City-St-Zip: NORTH PORT, FL 34287

Title: T (X) Change () Addition
Name: SIMONTCHIK, VICTOR
Address: 2676 GISELA RD
City-St-Zip: NORTH PORT, FL 34287 US

Title: T (X) Change () Addition
Name: BOHDANETS, ANATOLIY
Address: 4850 LIBBY ST
City-St-Zip: NORTH PORT, FL 34287

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: MIROSLAV BOYCHUK

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date