FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9400003408 (1)

ST. JUSTIN THE MARTYR ORTHODOX CHURCH, INC. Principal Place of Business Mailing Address 124S1 MUSCOVY DRIVE 12451 MUSCOVY DRIVE 3. Date Incorporated or Qualified JACKSONVILLE FL 32223 JACKSONVILLE FL 32223 07/12/1994 4. FEI Number Applied For 59-3261553 Not Applicable Principal Place of Business
\$535 BAY MEADOWS 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired Fee Required Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name REV. THEODORE PISARCHUK Street Address (P.O. Box Number is Not Acceptable) 82 12451 MUSCOVY DRIVE JACKSONVILLE FL 32223 83 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) (10/97) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE ☐ Change Addition PISARCHUK, THEODORE REV. NAME 1.2 NAME 12451 MUSCOVY DR. STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE CHRISY, REGAS 2.2 NAME 9230 BEAUCLERC CIR. E. STREET ADDRESS 2.3 STREET ADDRESS Jacksonville fl CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ■ Addition 3.1 TITLE HILL, PATRICIA 3.2 NAME 106 OVERLOOK DRIVE STREET ADDRESS 3.3 STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition KOPACH, KATHLEEN 4. 2 NAME 7560 FOUNDERS WAY STREET ADDRESS 4.3 STREET ADDRESS PONTE VEDRA BEACH FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE Change 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurage and that my 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 truefel empowered to execute this report as required by Chapter 617, Florida/Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE

62 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

DELETE

-0570

Change

Addition

FILED

Mar 13 1998 8:00am

Secretary of State