

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2004 08:00 AM
Secretary of State

DOCUMENT # N94000005976	
1. Entity Name ST. MAR ATHANASIOS SYRIAN ORTHODOX CHURCH, INC.	

Principal Place of Business 3800 OLD KEYSTONE RD TARPON SPRINGS, FL 34689 US	Mailing Address 136 BROADWAY SUITE #1 WOODCLIFF LAKE, NJ 07677 US
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DO NOT WRITE IN THIS SPACE

	
07062004 No Chg-NP CR2E037 (10/03)	
4. FEI Number 59-3289151	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JALLO, CHAMOUN 1942 LAGO VISTA BLVD. PALM HARBOR, FL 34685

8. 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. I am familiar with, and accept the obligations of registered agent.

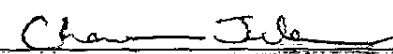
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: registered agent signature required when re-registering)

Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JALLO, CHAMOUN 1942 LAGO VISTA BLVD PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ASLAN, GOERGE 2928 SHANNON CIRCLE PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KURJO, MICHAEL 2706 PUNG DRIVE HOLIDAY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KILISSANLY, PAUL 13116 CIMARRON CIR. N. LARGO, FL 33774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASLAN, KAREEM 2351 COBBS WAY PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BSSOUS, SHUKRI 208 GARYL WY OLDSMAR, FL

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: X 	7/6/04	201-391-8882
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		