

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005976

FILED
Apr 29, 2005
Secretary of State

Entity Name: ST. MAR ATHANASIOUS SYRIAN ORTHODOX CHURCH, INC.

Current Principal Place of Business:

3800 OLD KEYSTONE RD
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

136 BROADWAY
SUITE #1
WOODCLIFF LAKE, NJ 07677 US

New Mailing Address:

35184 US 19 N
PALM HARBOR, FL 34684 US

FEI Number: 59-3289151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JALLO, CHAMOUN
1942 LAGO VISTA BLVD.
PALM HARBOR, FL 34685 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: JALLO, CHAMOUN
Address: 1942 LAGO VISTA BLVD
City-St-Zip: PALM HARBOR, FL 34685

Title: V () Delete
Name: ASLAN, GOERGE
Address: 2928 SHANNON CIRCLE
City-St-Zip: PALM HARBOR, FL

Title: S () Delete
Name: KURJO, MICHAEL
Address: 2706 PUNG DRIVE
City-St-Zip: HOLIDAY, FL

Title: T () Delete
Name: KILISSANLY, PAUL
Address: 13116 CIMARRON CIR. N.
City-St-Zip: LARGO, FL 33774

Title: D () Delete
Name: ASLAN, KAREEM
Address: 2351 COBBS WAY
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: BSSOUS, SHUKRI
Address: 208 GARYL WY
City-St-Zip: OLDSMAR, FL

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:

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Address:
City-St-Zip:

Title: () Change () Addition
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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 for the exemption stated in Section 119.07(3)(i), 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: CHAMOUN JALLO

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date