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May 28 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000005591 (1)

1. Corporation Name

ST. NICHOLAS RUSSIAN ORTHODOX MISSION AND OUTREACH MINISTRIES, INC.



Principal Place of Business

Mailing Address

4206 INVERRARY BLVD., #79B  
LAUDERHILL FL 33319  
US

4206 INVERRARY BLVD., #79B  
LAUDERHILL FL 33319-4139  
US

3. Date Incorporated or Qualified  
11/28/1995

3a. Date of Last Report  
04/30/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

25 Country

28 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRISCELLA, DAMIAN L  
4206 INVERRARY BLVD., #79B  
LAUDERHILL FL 33319

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  DELETE  
NAME CRISCELLA, DAMIAN L  
STREET ADDRESS 4206 INVERRARY BLVD 79B  
CITY-ST-ZIP LAUDERHILL FL 33319

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE TD  DELETE  
NAME CRISCELLA, JULIANNE  
STREET ADDRESS 4206 INVERRARY BLVD 79B  
CITY-ST-ZIP LAUDERHILL FL 33319

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE SD  DELETE  
NAME BRANCH, THOMAS  
STREET ADDRESS 910 BANKS ROAD  
CITY-ST-ZIP MARGATE FL 33063

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME BRANCH, MARY C  
STREET ADDRESS 910 BANKS ROAD  
CITY-ST-ZIP MARGATE FL 33063

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME CRISCELLA, LOUIS  
STREET ADDRESS 4206 INVERRARY BLVD 79B  
CITY-ST-ZIP LAUDERHILL FL 33319

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME CRISCELLA, STEVEN D  
STREET ADDRESS POST OFFICE BOX 220234  
CITY-ST-ZIP HOLLYWOOD FL 33022-0234

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.

REV. FR. DAMIAN L. CRISCELLA

SIGNATURE: V. Rev. Fr. Damian L. Criscella

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 May 27 (954) 486-6320  
Date Daytime Phone # 0035136

CR2E037 (9/96)