2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005591

FILED Apr 28, 2009 Secretary of State

Entity Name: ST. NICHOLAS RUSSIAN ORTHODOX MISSION AND OUTREACH MINISTRIES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	120TH WAY 5,, FL 33323	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
POB 4503 SUNRISE	328 :,, FL 3334503	28 US			
FEI Number	r: 65-1066848	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:	
3200 N W	LA, DAMIAN L 7 120TH WAY E, FL 33323	REV. US			
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	IRE:				
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CRISCELLA, E 3200 N W 120		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (CRISCELLA, J 3200 N W 120 SUNRISE, FL	TH WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	*) Delete	Title:	() Change () Addition	
Address:	CRISCELLA, II 4060 N.W. 119 SUNRISE,, FL	OTH AVENUE	Name: Address: City-St-Zip:	· · · · · · · · · · · · · · · · · · ·	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	4060 N.W. 119 SUNRISE,, FL D (CRISCELLA, N 4060 N.W. 119	OTH AVENUE 33323) Delete MICHAEL A OTH AVENUE	Name: Address:	() Change () Addition	
Address: City-St-Zip: Title: Name: Address:	4060 N.W. 119 SUNRISE,, FL D (CRISCELLA, N 4060 N.W. 119 SUNRISE,, FL	OTH AVENUE 33323) Delete MICHAEL A OTH AVENUE 33323) Delete OUIS III OTH STREET	Name: Address: City-St-Zip: Title: Name: Address:		

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: VERY REV. FR. DAMIAN L. CRISCELLA PD 04/28/2009