2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006159

Apr 17, 2009 Secretary of State

Entity Name: SAINT DEMETRIUS ORTHODOX CHURCH, DIOCESE OF THE SOUTH-ORTHODOX CHURCH IN

AMERICA, INC.

Current Principal Place of Business: New Principal Place of Business:

140 PRICE STREET NAPLES, FL 34113

Current Mailing Address: New Mailing Address:

140 PRICE STREET NAPLES, FL 34113

FEI Number: 65-0712997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCFATTER, GLEE M PA
3150 SAFE HARBOR DRIVE
NAPLES, FL 34117 US

MCFATTER, GLEB M PA
3150 SAFE HARBOR DRIVE
NAPLES, FL 34117 US

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: GLEB M MCFATTER, P.A. 04/17/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition DUNLAP, JOHN JR. Name: Name: 140 PRICE STREET Address: Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip: Title: PD () Delete Title: () Change () Addition MCFATTER, GLEB REV. Name: Name: Address: 140 PRICE ST. Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip: Title: () Delete Title: () Change () Addition GIANDELONE, JUDITH Name: Name: Address: 140 PRICE STREET Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip: Title: () Delete Title: () Change () Addition TRAYCOFF, MANOLY Name: Name: 142 WHEATRIDGE RD. Address: Address: City-St-Zip: VALPARAISO, IN 46385 City-St-Zip: Title: () Delete Title: () Change () Addition HAYDEN, GEORGE Name: Name: 140 PRICE STREET Address: Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip: Title: () Delete Title: () Change () Addition ZAPORA, ROBERT Name: Name: Address: 140 PRICE STREET Address: NAPLES, FL 34113 City-St-Zip: City-St-Zip:

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: REV. GLEB MCFATTER PD 04/17/2009