

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012230

Entity Name: ST. MARY MAGDELANE COPTIC ORTHODOX CHURCH, INC.**Current Principal Place of Business:**2014 SW 120TH TERRACE
GAINESVILLE, FL 32607**Current Mailing Address:**P O BOX 142762
GAINESVILLE, FL 32614-2762 US**FEI Number:** 26-1749809**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAXIMOUS, MENA AKA FR. JEROME MAXIMOUS
2014 SW 120TH TERRACE
GAINESVILLE, FL 32607 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:** MENA (AKA JEROME) MAXIMOUS**01/27/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TRUSTEE
Name	YOUSSEF, HG BISHOP
Address	P.O. BOX 1005
City-State-Zip:	COLLEYVILLE TX 76034

Title	TRUSTEE
Name	GUIRGUIS, JOSEPH G BIHOP BASIL
Address	4951 S. WASHINGTON AVE
City-State-Zip:	TITUSVILLE FL 32780

Title	TRUSTEE
Name	MAXIMOUS, MENA AKA FR. JEROME MAXIMOUS
Address	2014 SW 120 TERRACE
City-State-Zip:	GAINESVILLE FL 32607

Title	TREASURER
Name	MOAWAD, NASH DR.
Address	8589 SW 11TH RD.
City-State-Zip:	GAINESVILLE FL 32607

I hereby 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 all other like empowered.

SIGNATURE: NASH MOAWAD**TREASURER****01/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date