

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000009100

**Entity Name:** SAINT ANDREW THE APOSTLE ROMANIAN ORTHODOX CHURCH, INC.

**FILED**  
**Feb 02, 2013**  
**Secretary of State**  
**CC9210192310**

**Current Principal Place of Business:**

7439 FORT DADE AVENUE  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

7439 FORT DADE AVENUE  
BROOKSVILLE, FL 34601

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

AIRINEI, MIRCEA  
7439 FORT DADE AVENUE  
BROOKSVILLE, FL 34601 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name LASCU, TRAIAN  
Address 6920 TIERRA LINDA  
City-State-Zip: PORT RICHEY FL 34668

Title VPD  
Name CIRLIG, MARIA  
Address 12196 PONCE DE LEON BLVD  
City-State-Zip: BROOKSVILLE FL 34601

Title SD  
Name AIRINEI, JAMIE SPSA.  
Address 7439 FORT DADE AVENUE  
City-State-Zip: BROOKSVILLE FL 34601

Title D  
Name LASCU, MARIA  
Address 6920 TIERRA LINDA  
City-State-Zip: PORT RICHEY FL 34668

Title D  
Name STANA, TALPA  
Address 25183 CAMP CASTLE ROAD  
City-State-Zip: BROOKSVILLE FL 34601

*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: JAMIE AIRINEI**

**SECRETARY**

**02/02/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date