

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000010628

**Entity Name:** IMMANUEL SLAVIC EVANGELICAL CHURCH, INC.

**FILED**  
**May 01, 2014**  
**Secretary of State**  
**CC7443983106**

**Current Principal Place of Business:**

138 PALM COAST PKWY NE  
STE 219  
PALM COAST, FL 32137

**Current Mailing Address:**

138 PALM COAST PKWY NE  
STE 219  
PALM COAST, FL 32137

**FEI Number:** 46-4173959

**Certificate of Status Desired:** No

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

ALVARADO, OSCAR A  
15 HARGROVE LANE  
UNIT 2C  
PALM COAST, FL 32137 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 P  
Name OSTAPENKO, VIKTOR V  
Address 5 PRATT PLACE  
City-State-Zip: PALM COAST FL 32164

Title VP  
Name KIRILYUK, SERGEY I  
Address 18 SEATHORN PATH  
City-State-Zip: PALM COAST FL 32164

Title S  
Name ALVARADO, OKSANA  
Address 41 WHITE DOVE LANE  
City-State-Zip: PALM COAST FL 32164

Title T  
Name MARCHUK, ALEX  
Address 22 ST ANDREW CT  
City-State-Zip: PALM COAST FL 32137

*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:** OKSANA ALVARADO

**S**

**05/01/2014**

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

\_\_\_\_\_  
Date