

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34557

**FILED**  
**Jun 30, 2018**  
**Secretary of State**  
**CC4494123735**

**Entity Name:** ST. MARY AND ST. MINA COPTIC ORTHODOX CHURCH, INC.

**Current Principal Place of Business:**

2930 CR. 193  
CLEARWATER, FL 33759

**Current Mailing Address:**

P.O. BOX 17566  
CLEARWATER, FL 33762 US

**FEI Number:** 59-2964992

**Certificate of Status Desired:** No

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

MAKAR, FATHER KYRILLOS  
669 TOMOKA DR.  
PALM HARBOR, FL 34683 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 D  
Name MAKAR, KYRILLOS  
Address 2930 CR 193  
City-State-Zip: CLEARWATER FL 33759

Title D  
Name GHALY, FR. MEENA  
Address 2930 CR 193  
City-State-Zip: CLEARWATER FL 33759

Title DS  
Name LYDIA, GUIRGUIS  
Address 2220 CYPRESS HOLLOW CT  
City-State-Zip: SAFETY HARBOR FL 34695

Title DT  
Name GEORGE, SOLOMON  
Address 11 SAN MARCO ST.  
402  
City-State-Zip: CLEARWATER FL 33767

Title D  
Name ARSANY, YACOB  
Address 4718 BERWYN CT  
City-State-Zip: PALM HARBOR FL 34685

Title D  
Name AMIR, MALAK  
Address 2075 DUNSTON COVE RD  
City-State-Zip: CLEARWATER FL 33755

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

Title BOTR  
Name ABBA MOSES, FATHER BISHOY  
Address 4951 S. WASHINGTON AVE  
City-State-Zip: TITUSVILLE FL 32780

**Continues on page 2**

*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:** GEORGE SOLOMON

**DT**

**06/30/2018**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            BOTR  
Name            MAKAR, FATHER KYRILLOS  
Address        669 TOMOKA DR.  
City-State-Zip: PALM HARBOR FL 34683