

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

DOCUMENT# N93000003313

**FILED  
Jan 30, 2018  
Secretary of State  
CC185555441**

**Entity Name:** UKRAINIAN PROJECT FUND, INC.

**Current Principal Place of Business:**

1223 RIDGEGREEN LOOP N.  
LAKELAND, FL 33809-0870

**Current Mailing Address:**

P.O. BOX 691542  
ORLANDO, FL 32869 US

**FEI Number: 59-3194849**

**Certificate of Status Desired: No**

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

HOEQUIST, CHARLES E  
3191 MAGUIRE BLVD.  
SUITE 167  
ORLANDO, FL 32803 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 HARPER, JASON K  
Address 1223 RIDGEGREEN LOOP N  
City-State-Zip: LAKELAND FL

Title D  
Name DMYTRIJUK, WALT  
Address 47 ROMAN LN  
City-State-Zip: BUFFALO NY 14226

Title D  
Name HAJDUCZOK, GEORGE DR.  
Address 126 SHERMAN HALL, UNIVERSITY AT  
BUFFALO  
City-State-Zip: BUFFALO NY 14214

Title TM  
Name WARREN, NATALIA  
Address 5836 PETUNIA  
City-State-Zip: ORLANDO FL 32821

Title TR  
Name TORCHINE, OLEH  
Address 28648 RYAN RD.  
City-State-Zip: WARREN MI 48092

Title TR  
Name MCKAY, YURKO  
Address 5160 GLASGOW AVE.  
City-State-Zip: ORLANDO FL 32819

*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: JASON K. HARPER**

**PRESIDENT**

**01/30/2018**

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

\_\_\_\_\_  
Date