

**2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 820963

**Entity Name:** THE DIOCESE OF NEWTON FOR THE MELKITES IN THE UNITED STATES OF AMERICA, INC.

**Current Principal Place of Business:**

3 VFW PARKWAY  
WEST ROXBURY, MA 02132

**Current Mailing Address:**

3 VFW PARKWAY  
WEST ROXBURY, MA 02132

**FEI Number: 04-2636319**

**Certificate of Status Desired: No**

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

GHANOUM, GABRIEL R  
5715 LAKE IDA ROAD  
DELRAY BEACH, FL 33484 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 VD  
Name RACZKA, PHILIP  
Address 7 VFW  
City-State-Zip: WEST ROXBURY MA 02132

Title PD  
Name SAMRA, NICHOLAS J  
Address 3 VFW PARKWAY  
City-State-Zip: WEST ROXBURY MA 02132

Title SD  
Name GHANOUM, GABRIEL R  
Address 5715 LAKE IDA RD.  
City-State-Zip: DELRAY BEACH FL 33484

Title CFO  
Name SHALHOUB, ROBERT J  
Address 802 RIFLE CAMP RD  
City-State-Zip: WOODLAND PARK NJ 07424

*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: DEACON ROBERT J SHALHOUB**

**CFO / TREASURER**

**01/11/2021**

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

\_\_\_\_\_  
Date