

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 845032

1. Corporation Name

ARMENIAN RELIEF SOCIETY OF ~~NORTH AMERICA~~, INC.
Eastern USA,

Principal Place of Business

80 BIGELOW AVENUE
WATERTOWN MA 02122

Mailing Address

80 BIGELOW AVENUE
WATERTOWN MA 02122

02472

02472



FILED

00 MAY -1 PM 5:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

01/22/1980

4. FEI Number

04-2684459

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503 Florida Statutes.

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered agent signature required when reinstating)

9/14/00

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME GARABEDIAN, MAYDA

STREET ADDRESS 8701 RIDGE AVE

CITY-ST-ZIP PHILADELPHIA PA 19128

TITLE VPD ☒ DELETE

NAME HAROIAN, JANET

STREET ADDRESS 936 CHARCELLOR DR

CITY-ST-ZIP EDWARDSVILLE IL 62025

TITLE SD ☐ DELETE

NAME KILEDJIAN, KNAR

STREET ADDRESS 517 OREGON AVE

CITY-ST-ZIP CLIFFSIDE PARK NJ 07010

TITLE TD ☒ DELETE

NAME DAGHLIAN, TALIN

STREET ADDRESS 10 ELENA DR

CITY-ST-ZIP OLD TAPPAN NJ 07675

TITLE D ☒ DELETE

NAME DAVIDIAN, AIDA

STREET ADDRESS 6885 CHIPPEWA AVE NW

CITY-ST-ZIP N CANTON OH 44720

TITLE D ☒ DELETE

NAME SHAHBAZIAN, SANDRA

STREET ADDRESS 108-10 METROPOLITAN AVE

CITY-ST-ZIP FOREST HILLS NY 11375

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Daghlia, Talin

1.3 STREET ADDRESS 10 ELENA DRIVE

1.4 CITY-ST-ZIP Old Tappan N.J 07675

2.1 TITLE VPD ☒ Change ☐ Addition

2.2 NAME Shahbazian Sandra

2.3 STREET ADDRESS 108-10 Metropolitan Avenue

2.4 CITY-ST-ZIP Forest Hills N.Y. 11375

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME 100003234691

3.3 STREET ADDRESS -05/02/00-01003-007

3.4 CITY-ST-ZIP *****332.50 *****297.50

4.1 TITLE TD ☒ Change ☐ Addition

4.2 NAME Khachadoorian, Rosemary

4.3 STREET ADDRESS 34 Porter Street

4.4 CITY-ST-ZIP Watertown, MA 02472

5.1 TITLE D ☐ Change ☐ Addition

5.2 NAME Katcherian, Donna

5.3 STREET ADDRESS 37760 Meadowhill Drive W.

5.4 CITY-ST-ZIP Northville, MI 48167

6.1 TITLE D ☐ Change ☐ Addition

6.2 NAME Parseghian, Hani

6.3 STREET ADDRESS 20 Woodland Park Apt # 347

6.4 CITY-ST-ZIP Lowell, MA 01851

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Talin Daghlia* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/14/99 J. LEWIS MAY 1 2000