

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703950

FILED
Mar 10, 2009
Secretary of State

Entity Name: HOLY MOTHER OF GOD GREEK ORTHODOX CHURCH, INC.

Current Principal Place of Business:

1645 PHILLIPS ROAD
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1645 PHILLIPS ROAD
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-1709559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRIGAN, GLEN A TREAS
1924 SAGEWAY DR.
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

MOOKAS, THOMAS TREAS
783 DERBYSHIRE RD
TALLAHASSEE, FL 32312 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: THOMAS MOOKAS

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WERNKE, MIKE
Address: 534 MEADOW RIDGE DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: P () Delete
Name: JOANOS, NICHOLAS VP
Address: 2013 MORNING DOVE RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: RS () Delete
Name: VLANDIS, JOHN RECSEC
Address: 6100 BORDERLINE DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: TREA () Delete
Name: PERRIGAN, GLEN A TREAS
Address: 1924 SAGEWAY DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: RS (X) Delete
Name: KALFAS, JAMES
Address: 1951 MERIDIAN RD.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JOANOS, EMANUEL PRES
Address: 2427 OWLS HEAD RD
City-St-Zip: TALLAHASSEE, FL 32310

Title: VP (X) Change () Addition
Name: KOIKOS, JIMMIE VP
Address: 7999 PRESERVATION RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: SECT (X) Change () Addition
Name: ALEX, PENN-WILLIAMS SECT
Address: 704 EAST 6TH AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: TREA (X) Change () Addition
Name: MOOKAS, THOMAS TREAS
Address: 783 DERBYSHIRE RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS MOOKAS

TREA

03/10/2009

Electronic Signature of Signing Officer or Director

Date