2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # 721484

1. Entity Name
PAN-ICARIAN BROTHERHOOD OF AMERICA HELIOS CHAPTER 19, INC.

Principal Place of Business	Mailing Address
1476 PINEHURST RD. DUNEDIN, FL 34698-3838	1476 PINEHURST RD. DUNEDIN, FL 34698-3838

DO NOT WRITE IN THIS SPACE

04202004 No Chg-NP CR2E037 (10/03)

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, ANN
1476 PINEHURST RD.
DUNEDIN, FL 34698

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000127063
04/23/04-80060-004 61.25

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	CROCKETT, CHARLOTTE
STREET ADDRESS	34 ACACIA STREET
CITY-ST-ZIP	CLEARWATER, FL 33767
TITLE	VPD
NAME	GLAROS, ARGIE
STREET ADDRESS	5745 CHEYENE DR.
CITY-ST-ZIP	HOLIDAY, FL 34690
TITLE	S
NAME	TRIPODIS, ANNA
STREET ADDRESS	3072 WOODSONG LN.
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	VPD
NAME	PARDOS, STANLEY
STREET ADDRESS	2481 N.E. COACHMAN - SUITE #116
CITY-ST-ZIP	CLEARWATER, FL 33765
TITLE	T
NAME	ANDERSON, ANNA
STREET ADDRESS	2046 BRENOLA RD.
CITY-ST-ZIP	CLEARWATER, FL 33755
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ann Andreson - ANN ANDRESON 4/20/04 727-443-2089
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #