

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764098

FILED  
Jan 12, 2007  
Secretary of State

**Entity Name:** THE GREEK ORTHODOX COMMUNITY OF WEST CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

4705 W. GULF TO LAKE HWY  
LECANTO, FL 34461 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 241  
INVERNESS, FL 34451241 US

**New Mailing Address:**

**FEI Number:** 59-2424269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAVROS, GEORGE S  
6 BYRSONIMA COURT W.  
SUGARMILL WOODS  
HOMOSASSA, FL 34446 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: AUCCOIN, DOROTHEA  
Address: 3948 . FIELDWOOD COURT  
City-St-Zip: LECANTO, FL 34461

Title: D ( ) Delete  
Name: NESTOR, DAN E  
Address: 5 DUSTY MILLER CT  
City-St-Zip: HOMOSASSA, FL 34446

Title: T ( ) Delete  
Name: PONTICOS, STEPHAN  
Address: 7 BYRSONIMA COURT W.  
City-St-Zip: HOMOSASSA, FL 34446

Title: P ( ) Delete  
Name: MAVROS, GEORGE S DR  
Address: 6 BYRSONIMA CT W  
City-St-Zip: HOMOSASSA, FL 34446

Title: V ( ) Delete  
Name: KANARIS, GEORGE  
Address: 9 BYRSONIMA CT W  
City-St-Zip: HOMOSASSA, FL 34446

Title: D ( ) Delete  
Name: DALMANIERAS, ALEX  
Address: 2634 E. MARCIA STREET  
City-St-Zip: INVERNESS, FL 34453

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: S (X) Change ( ) Addition  
Name: BINIKOS-BROM, ATHENA  
Address: 13606 WHITBY RD  
City-St-Zip: HUDSON, FL 34667

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GEORGE S. MAVROS

P

01/12/2007

Electronic Signature of Signing Officer or Director

Date