

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
May 08, 2012
Secretary of State**

DOCUMENT# N38577

Entity Name: PANHELLENIC FEDERATION OF FLORIDA INC.**Current Principal Place of Business:**909 PENINSULA ROAD
TARPON SPRINGS, FL 34689 US**New Principal Place of Business:****Current Mailing Address:**909 PENINSULA ROAD
TARPON SPRINGS, FL 34689 US**New Mailing Address:**

FEI Number: 59-3138537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:POULLAS, MARIA
909 PENINSULA ROAD
TARPON SPRINGS, FL 34689 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: P
Name: POULLAS, MARIA
Address: 909 PENINSULA ROAD
City-St-Zip: TARPON SPRINGS, FL 34689 USTitle: GOV
Name: AGELATOS, SOTIRIOS
Address: 109 BAYOU BLVD
City-St-Zip: OLDSMAR, FL 34677Title: VP
Name: GEORGIADIS, ANGELA
Address: 9830 SAGO PT DR
City-St-Zip: LARGO, FL 33777Title: TR
Name: SKORDILIS, KAY
Address: 217 ATHENS STREET
City-St-Zip: TARPON SPRINGS, FL 34689Title: SE
Name: MARKATOS, EKATERINI
Address: 5630 IVY LANE
City-St-Zip: HOLIDAY, FL 34690Title: AS
Name: STRATOS, OLGA
Address: 9959 34TH WAY NORTH
City-St-Zip: PINELLAS PARK, FL 33782

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: KAY SKORDILIS

TR

05/08/2012

Electronic Signature of Signing Officer or Director_____
Date