2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N94000002730

Entity Name: FLORIDA HELLENIC-AMERICAN CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

1202 PARILLA DE AVILA
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

1202 PARILLA DE AVILA
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-3386815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TSOKOS, CHRIS P DR.
1202 PARRILLA DE AVILA
TAMPA, FL 33613 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: TSOKOS, CHRIS P
Address: 10319 LAKE CARROLL WAY
City-St-Zip: TAMPA, FL

Title: PCEO ( ) Delete
Name: TSOKOS, CHRIS P DR.
Address: 1202 PARRILLA DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: VP ( ) Delete
Name: KOUTRAS, DENNIS DR.
Address: 1528 AKOERMARLE CT.
City-St-Zip: DUNEDIN, FL 34698

Title: T ( ) Delete
Name: BRADNEY, DEBORAH
Address: 1202 PARILLA DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: S ( ) Delete
Name: KOUTILAS, DIANNE
Address: 1528 ABERMARLE CT.
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: CHRIS P. TSOKOS D 03/25/2009

Electronic Signature of Signing Officer or Director — Date