

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764098

Entity Name: THE GREEK ORTHODOX COMMUNITY OF WEST CENTRAL FLORIDA, INC.**FILED**
Feb 08, 2022
Secretary of State
5868173923CC**Current Principal Place of Business:**4705 W. GULF TO LAKE HWY
LECANTO, FL 34461**Current Mailing Address:**P.O BOX 192
LECANTO, FL 34461 US**FEI Number: 59-2424269****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JONES, GERALDINE
727 E GILCHRIST CT
HERNANDO, FL 34442 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: GERALDINE JONES****02/08/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRES
Name JONES, GERALDINE
Address 727 E GILCHRIST CT
City-State-Zip: HERNANDO FL 34442**Title** VP, SUB-DEACON
Name KIKAREAS, PETER
Address 611 W GARBO LANE
City-State-Zip: BEVERLY HILLS FL 34465**Title** DIRECTOR
Name MASOUD, PAMELA DR
Address 2828 N FOLKSTONE LOOP
City-State-Zip: HERNANDO FL 34442**Title** TREASURER
Name CEFOLA, DEMETRIA
Address 3421 N HAMMOCK DUNES
VILLAGE POINT
City-State-Zip: LECANTO FL 34461**Title** SECRETARY
Name NICOLAOU, GEORGIA MRS.
Address 14 BYRSONIMA COURT WEST
City-State-Zip: HOMOSASSA FL 34446**Title** DIRECTOR
Name AUCCOIN, DOROTHEA
Address 3948 W FIELDWOOD CT
City-State-Zip: LECANTO FL 34461**Title** DIRECTOR
Name TZIVANIS, ROBIN MRS.
Address 5672 W JUSTIN COURT
City-State-Zip: HOMOSASSA FL 34448**Title** DIRECTOR
Name LAZAROU, JOHANNA HELEN MRS.
Address 11 CROSSANDRA DR
City-State-Zip: HOMOSASSA FL 34446**Continues on page 2**

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: GERALDINE JONES**PRESIDENT****02/08/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WOYTHALER, STEPHANIE
Address	698 E HARTFORD ST
City-State-Zip:	HERNANDO FL 34442