

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38577

**FILED**  
**Mar 10, 2018**  
**Secretary of State**  
**CC9338368805**

**Entity Name:** PANHELLENIC FEDERATION OF FLORIDA INC.

**Current Principal Place of Business:**

7 N. PINELLAS AVE  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

P.O. BOX 1321  
CLEARWATER, FL 33757 US

**FEI Number:** 59-3138537

**Certificate of Status Desired:** No

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

POULLAS, MARIA  
7 N. PINELLAS AVE  
TARPON SPRINGS, FL 34689 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name POULLAS, MARIA  
Address 909 PENINSULA ROAD  
City-State-Zip: TARPON SPRINGS FL 34689

Title GOV  
Name LEVENDIS, DEMETRIOS  
Address 909 PENINSULA ROAD  
City-State-Zip: TARPON SPRINGS FL 34689

Title VP  
Name GEORGIADIS, ANGELA  
Address 9830 SAGO PT DR  
City-State-Zip: LARGO FL 33777

Title ASSISTANT TREASURER  
Name SKORDILIS, KAY  
Address 217 ATHENS STREET  
City-State-Zip: TARPON SPRINGS FL 34689

Title S  
Name MIHOPOULOS, ELEONORA  
Address 311 HARBOR PASSAGE  
City-State-Zip: CLEARWATER FL 34630

Title TR  
Name ANTON, NICK  
Address 1919 DUNLOE CIR  
City-State-Zip: DUNEDIN FL 34698

*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:** NICK ANTON

**TREASURER**

**03/10/2018**

Electronic Signature of Signing Officer/Director Detail

Date