## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

1. Corporation Name

701821

(1)

SAINT BARBARA GREEK ORTHODOX CHURCH OF THE GREEK ORTHODOX COMMUNITY OF MANASOTA, INC.

**FILED** May 20 1997 8:00am Secretary of State

Principal Place	e of Business	Mailing Address		, , , , , , , , , , , , , , , , , , , ,	
7671 N. LOCKWOOD RIDGE RD. 7671 N LOCK SARASOTA FL 34243-4831 SARASOTA FL					
US		U\$		3. Date Incorporated or Qualified 12/21/1960	3a. Date of Last Report 04/09/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-6136818	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		b. Cartincale of Status Desired	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30		Yes No
	9. Name and Address of Current	t Registered Agent	B1 Name	10. Name and Address of New Re	gistered Agent
	ALEX Arlin St. IIS FL 34275		82 Street A	SOPHIA DILLO SIGNIFICATION  RICHARD FNON	
office or ragent. La SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of the state of the obligation of the state of the s	nt and litle if applicable. (NO	authorized by the corp forda Statutes.	corporation submits this statement for the poration's board of directors. I hereby acception to the poration's pour property of the province when feinstaling)  ADDITIONS/CHANGES TO OFFICE	3/23/97
TITLE	P	DELETE	1.1 TITLE	PRESIDENT	Change Addition
NAME	BLAIR, ALEX		1.2 NAME	STRATTON J. NIC	DIRIBES
STREET ADDRESS	1458 MARLIN ST.		1.3 STREET ADDRESS	4193 LHS PACI	nns way
CITY - ST - ZIP	NOKOMIS FL 34275		1.4 CITY-ST-ZIP	SHKHSOTA, FI	34238
TITLE	VPD	<b>⋈</b> DELETE	2.1 TITLE	SHRASOTA, FI VICE PRESIDENT	Change Additio
NAME	STRATTON, NICOLAIDES	•	2.2 NAME	AIAN JOHNSON 8603 54TH AVE BRADENTON, FL. 3	
STREET ADDRESS	4193 LAS PALMAS WAY		2.3 STREET ADDRESS	8603 54TH AVE	W.
CITY-ST-ZIP	SARASOTA FL 34238		2. 4 CITY-ST-ZIP	BRADENTON, FI. 3	4270
TITLE	TD	☐ DELETE	3.1 TITLE		Change Addition
NAME	DILLES, SOPHIA		32 NAME		
STREET ADDRESS	1116 79TH STREET N.W.		3.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34209		3.4. CITY-ST-ZIP		
TITLE	SD	DELETE	4.1 TITLE	RECORDING SECRETA	タだy 以 Change L Addition
NAME	VITIKOS, ALTHAIA	<b>r</b>	4. 2 NAME	LISA SOKOS	1 41/5
STREET ADDRESS	2376 HYDE PARK		4.3 STREET ADDRESS	1307 82 nd St	
CITY-ST-ZIP	SARASOTA FL 34239		4.4 CITY-ST-ZIP	BRADENTON, FI	34209
TITLE	SD SD	☐ DELETE	5.1 TITLE	<u> </u>	Change Addition
NAME	KIRLANGITIS, MARIA	time a section	5.2 NAME	•	
STREET ADORESS	9228 WOOD MEADOW LOOP	•	5.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34202	DELETE	5.4 CITY - ST - ZIP	ASSISTANT TREASUL	CER Change Addition
TITLE	D CONTRACTOR	N DETELE			par oneinge LI ADUIRO
NAME	VOSE, LOUIS A		6.2 NAME	John Olevick 5500 merrim	a DR
STREET ADDRESS	327 BOB WHITE WAY		6.3 STREET ADDRESS	SARASOTA, FI	34231
CITY-S1-ZIP	SARASOTA FL 34236		6.4 CITY-ST-ZIP	SAKISEIA	J 7 J J J

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation on the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.