2001 UNIFORM BUSINESS REPORT (UBR)

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 703950 1. Entity Name HOLY MOTHER OF GOD GREEK ORTHODOX CHURCH, INC.						APPROVED)	
					AND FILED 01 MAY 14 AM 9: 35			
1645 PHILLIPS ROAD TALLAHASSEE FL 32308		1645 PHILLIPS ROAD TALLAHASSEE FL 32308			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State	City & State		4. FEI Number	59-1709559		plied For t Applicable
Zip Country		Zip	Country		5. Certificate of	of Status Desired	\$8.75 Add Fee Required	
	7. Name and Address of New Registered Agent							
	Name							
PAPAGEORGE, MIKE 529 FRANK SHAW RD			Street	Street Address (P.O. Box Number is Not Acceptable)				
	SSEE FL 32312		City		- 		FL Zip Code)
	named entity submits this statement for	- the second sec						
[?	Signature, typed or printed name of registered agent	9. Election Campaigr F	~ ~	\$5.00	May Be	Make Che	ck Payable to	
gradin to the space of	FEE IS \$61.25 Trust Fund Contribution.		ion. 🗀	☐ Added to Fees				
10.	OFFICERS AND DI		11.		DDITIONS/CHA	NGES TO OFFICERS AND	D DIRECTORS IN Change	10 Addition
TITLE " NAME STREET ADDRESS CITY-ST-ZIP	PD TALANTIS, KATHLEEN 2122 GLENNRIDGE TALLAHASSEE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP D			⊏ ≇ c⊹ranĝe	
TITLE NAME Street address City-St-Zip	P PAPAGEORGE, MIKE 529 FRANK SHAW RD TALLAHASSEE FL 32312	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3	700004214277 - Addition -05/14/0101019023 *****70.00 *****70.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KOIKOS, JIMMY 1906 ROSEDALE TALLAHASSEE FL	Z . Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2013		10LAS ING BOVE ROA FE/FL 3231		X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KYPREOS, EVA 1500 S MERIDIAN ST TALLAHASSEE FL 32301	∑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	324	YNA, GE 9 HEATI LKHASSEI	FORGE HER HILL LA 5, FL 32301	□ Change *Æ 8	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VLANDIS, JOHN 6100 BORDERLINE DR TALLAHASSEE FL 32312	□ X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAR 7120	KAS, CH	HRISTOPHER NGE RIDGE RO EE, FL 32312	☐ Change	▼ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POULOS, ANDREW 113 DEVEREAUX DR THOMASVILLE GA 31792	∑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOU 4032	MBELIS MCLA		☐ Change	⊠ Addition

SIGNATURE:

changed, or on an attachment with an address, with all other like empowered

REGET RUZYNA

12. I hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that n y 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 is required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

5/14/01 410-6323