

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712028

FILED
Feb 01, 2012
Secretary of State

Entity Name: HELLENIC BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

205 HIBISCUS STREET
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

205 HIBISCUS STREET
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 59-2799626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANERIS, JAMES
3800 SAILMAKER LANE
HOLIDAY, FL 34691 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: P
Name: HOUVARDAS, EMMANUEL
Address: 10628 PORTO FINO CIRCLE
City-St-Zip: TRINITY, FL 34655

Title: T
Name: TSAPRAZIS, HELEN
Address: 644 ISLE WAY # 608
City-St-Zip: CLEARWATER,, FL 33767

Title: VD
Name: TISIS, NICHOLAS
Address: 4652 TARAY RD.
City-St-Zip: HOLIDAY, FL 34690

Title: S
Name: PSIROPOULOS, FREIDA
Address: 5314 SKYLARK DRIVE
City-St-Zip: HOLIDAY, FL 34690

Title: D
Name: LIVANOS, MINA
Address: 1601 PALOMINO DR.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D
Name: ANDRIOTAKIS, ANTIGONI
Address: 1800 MARINER DR. # 2
City-St-Zip: TARPON SPRINGS, FL 34689

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: JAMES KANERIS

RA

02/01/2012

Electronic Signature of Signing Officer or Director

Date