FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

Feb	12	1998	8:0	0am				
Se	cret	ary c	of St	ate				

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DOCUI	WENT # 713601	1 (3)			
GREEK ORTHODOX CHURCH OF THE HOLY TRINITY, INC.					
Principal Place of Business Mailing Address				I IDENIA (DODE HIERD HALL DANN DONN HAN DIGHA CHAN I	
409 OLD COACHMAN RD. 409 OLD COACHMAN RD. CLEARWATER FL 34625 CLEARWATER FL 34625			3. Date Incorporated or Qualified		
OLDMINITE!	, F 04059	OCERNITATEN PE STORY		11/09/1967 4. FEI Number	Annting For
				59-1200958	Applied For Not Applicable
2. Principal P	lace of Business	2a. Mailing Address			\$8.75 Additional
Sulte, Apt.	# etc	Suite, Apt. #, etc.	<u></u>		Fee Required
22	π, σ (C.	27		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State City & State		City & State		7. Is this nonprofit corporation a homeowners a	
Zip	Country	28	Country	Yes 🗆	
24	25	├ ─ `	30	This corporation owes or has paid the currer Personal Property Tax due June 30.	
	9. Name and Address of Current			10. Name and Address of New Registered Ag	ent
50.1011	46 14456 BB1		81 Name		
ROUSAKIS, JAMES REV. 2449 OLD COACH TRAIL				Address (P.O. Box Number is Not Acceptable)	
CLEARM	VATER FL 34025 33765		63		
٠.			84 City		85 Zip Code
11 Duraugat	to the provisions of Continue 617.0500	and 617 1509 Florida Statuta		Fi_	
office or re	egistered agent, or both, in the State of	of Florida, Such change was au	uthorized by the corp	corporation submits this statement for the purpose of ch poration's board of directors. I hereby accept the appoin	itment as registered
SIGNATURE .	1 Le. 4 (2)	mer Lo	usabo	/ 1/15/98	7
	Signature, typed or printed name of registrate agen		Registered Agent signature		(DEOTODO IN 40
12.	OFFICERS AND	DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND D	Change Addition
NAME	LAGOS, MARKOS		1.2 NAME	MASTORIDES, MICHAEL S.	
STREET ADDRESS	1452 STURBRIDGE CT		1.3 STREET ADDRESS	1570 ELMWOOD ST.	
CITY-ST-ZIP	DUNEDIN FL		1.4 CITY - ST - ZIP	CLEARWATER, FL 33755	
TITLE	DVP	DELETE	2.1 TITLE	DVP	Change
NAME STREET ADDRESS	MASTORIDES, MICHAEL 1570 ELMWOOD ST		2.2 NAME 2.3 STREET ADDRESS	MANTZARIS, GEORGE	}
CITY-ST-ZIP	CLEARWATER FL		2. 4 CITY-ST-ZIP	408 CASLER AVE. CLEARWATER, FL 33755	
TITLE	DVP	DELETE	3.1 TITLE	BOUTZOUKAS, MICHAEL *	Change Addition
NAME	MANTZARIS, GEORGE		3.2 NAME	1525 Burnham	ļ
STREET ADDRESS	408 CASSLER AVE		3.3 STREET ADDRESS	Dunedin, FL 34698	ļ
CITY-ST-ZIP TITLE	CLEARWATER FL DT	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change
NAME	BOUTZOUKAS, MICHAEL		4. 2 NAME	BAKKALAPULO, LOUIS	
STREET ADDRESS	1525 BURNHAM LANE		4.3 STREET ADDRESS	1990 Hidden Take Dr	
CITY-ST-ZIP	DUNEDIN FL	TT SCIEVE	4.4 CITY - ST - ZIP	1990 Hidden Lake Dr. Palm Harbor, FL 34683	06
TITLE	AT Kastrenakes, Michael	☐ DELETE	1	PROKOS, NICHOLAS	Change
NAME STREET ADDRESS	3817 WELLINGTON PARKWAY	,		1561 Glen Hollow Lane S.	
CITY-ST-ZIP	PALM HARBOR FL			Dunedin FL 34698	}
TITLE	DS	DELETE	6.1 TITLE		Change Addition
NAME	PAPASTAVROU, KATHERINE		6.2 NAME	KKITTIES DENO CLOIM OUR	PE 2.12
STREET ADDRESS	1314 FOREST EDGE BLVD		6.3 STREET ADDRESS	2326 Sweetbriar Court	2.12

CITY-ST-ZIP ULUSMAR FL

64 CITY-ST-ZIP Dunedin, FI, 34698

14. I 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 or the receiver or trustee empoweled to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 If changed to on an attachment with an address

SIGNATURE:

15/98