

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717970

FILED  
Sep 18, 2008  
Secretary of State

**Entity Name:** SAINT ANDREW GREEK ORTHODOX CHURCH OF KENDALL, INC.

**Current Principal Place of Business:**

7901 NORTH KENDALL DRIVE  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

7901 NORTH KENDALL DRIVE  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** 59-1806073      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MULLEN, THOMAS W.  
7900 RED ROAD  
SUITE 26  
SOUTH MIAMI, FL 33143 US

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

POWELL, BEN  
7375 SW 154TH TERRACE  
MIAMI, FL 33157 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: BEN POWELL

09/18/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCDONALD, BRIAN  
Address: 1130 ORIOLE AVE.  
City-St-Zip: MIAMI, FL 33166

Title: V ( ) Delete  
Name: SPILLIS, ELECTRA  
Address: 13632 DERING BAY DR.  
City-St-Zip: CORAL GABLES, FL 33158

Title: S ( ) Delete  
Name: KALLINOSIS, LOU  
Address: 1749 SW 83RD COURT  
City-St-Zip: PALMETTO BAY, FL 33157

Title: T ( ) Delete  
Name: POWELL, BENJAMIN  
Address: 7375 SW 154TH TERR.  
City-St-Zip: PALMETTO BAY, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SPILLIS, ELECTRA  
Address: 13632 DEERING BAY DRIVE  
City-St-Zip: CORAL GABLES, FL 33158

Title: V (X) Change ( ) Addition  
Name: SARAFOGLU, ALEX  
Address: 6904 VERONESE STREET  
City-St-Zip: CORAL GABLES, FL 33146

Title: S (X) Change ( ) Addition  
Name: PANAGAKIS, MIA  
Address: 10833 SW 132ND CIRCLE COURT  
City-St-Zip: MIAMI, FL 33186

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: R. BENJAMIN POWELL

T

09/18/2008

Electronic Signature of Signing Officer or Director

Date