

2000 UNIFORM BUSINESS REPORT (UBR)

0005681

DOCUMENT # 720477

1. Entity Name

ST. ATHANASIOS GREEK ORTHODOX CHURCH, INC.

Principal Place of Business

Mailing Address

6566 SW 33RD STREET
MIAMI FL 33155
1710 SW 27th Ave
Miami, FL 33145
1710 S.W. 27TH AVENUE
GEO S. GIORGAS
MIAMI FL 33145

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

GIOURGAS, GEORGE S
1710 SW 27TH AVE
MIAMI FL 33145

REINSTATEMENT

2000-01

4. FEI Number

59-2582856

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KOUSSIARES, PIERRE
6200 S.W. 84 STREET
MIAMI FL
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KONTZAMANY, GUS
231 S.W. 28 ROAD
MIAMI FL
☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HEROPOULOS, GEO
12130 S.W. 96 STREET
MIAMI FL 33168
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GEOURGAS, GEORGE S
1710 SW 27 AVE
MIAMI FL
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
400003828904--3
-03/03/01--01116--003
*****61.25 *****61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
400003828904--3
-03/03/01--01116--004
*****236.25 *****236.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GEOURGAS, GEORGE S.
1710 SW 27 Ave
Miami, FL 33145
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/18/00 305-4450505
Date Daytime Phone #

CR2E037 (5/00)