## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Apr 03, 2006 8:00 am Secretary of State **DOCUMENT #722664** 04-03-2006 90356 029 \*\*\*\*61.25 1. Entity Name SAINT CATHERINE GREEK ORTHODOX CHURCH Mailing Address Principal Place of Business 110 SOUTHERN BLVD 110 SOUTHERN BLVD WEST PALM BEACH, FL 33405 WEST PALM BEACH, FL 33405 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. 02212006 Chg-NP CR2E037 (11/05) Suite, Apt. #, etc. Applied For FEI Number 59-1834429 City & State City & State Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Zip Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SPILLIAS, KEN Street Address (P.O. Box Number is Not Acceptable) 250 AUSTAILIAN AVE S #1504 W PALM BCH, FL 33401 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make check payable to 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Florida Department of State П Added to Fees Trust Fund Contribution. Due by May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition ☐ Delete TITLE TITLE NAME LUCAS, NICK NAME STREET ADORESS 320 HAMMOCKS TRAIL STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33413 CITY-ST-7/P VP. Change Addition TITLE Delete Elias Magalios TITLE NAME SOFIANOS, MICHAEL NAME 321 Palmetto St. STREET ADDRESS 4046 BAHIA ISLE CIR. STREET ADDRESS West Palm Beach, FL 33405 CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP ☐ Addition Thange Change Delete TITLE Mrs. Stella Habib TITLE NAME FABRO, AMELIA NAME 18145 SE Heritage Drive STREET ADDRESS STREET ADDRESS 2683 W EMORY DR UNIT J Tequesta, FL 33469 CITY-ST-ZIP WEST PALM BEACH, FL 33415 CITY-ST-ZIP Addition ☐ Change TITLE Delete **Demetrios Theodossakos** TITLE MAME MARTINDALE, ALEXIOS 6410 Brevard Avenue STREET ADDRESS STREET ADDRESS **6B ATRIUM CIRCLE** West Palm Beach, FL 33405 CITY-ST-7IP LAKE WORTH, FL 33462 CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete TITLE NAME MUSGROVE, STEVE NAME STREET ADDRESS 151 CYPRESS COVE STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP JUPITER, FL 33458 12 Change Addition TD Oelete TITLE **James Maragos** TD SOFIANOS, MICHAEL NAME 3545 S. Ocean Blvd. Apt. 406 NAME STREET ADDRESS 4046 BAHIA ISLE CIRCLE STREET ADDRESS Palm Beach, FL 33480 CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-7/P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

INTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED