2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2011
Secretary of State

DOCUMENT# 726925

Entity Name: HELLENIC SOCIETY OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

2940 C.R. 214
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

2940 C.R. 214
SAINT AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 59-2739282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SARRIS, GERALDINE R
2940 C.R. 214
SAINT AUGUSTINE, FL 32084 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: D
Name: POULOS, VASSO C
Address: 1124 COMPASS ROE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: P
Name: STEVE, POULOS
Address: 1124 COMPASS ROW
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D
Name: FOTIANOS, THEO
Address: 8 NINTH ST
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S
Name: SARRIS, GERALDINE R
Address: 2940 C.R. 214
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T
Name: WELLING, ELIZABETH K
Address: 17 SUNFISH DR
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D
Name: GARY, PETERSON
Address: 1191 BROOKSIDE COURT
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: STEVE POULOS PRES 02/15/2011
Electronic Signature of Signing Officer or Director Date