2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #730517

1. Entity Name
ST. KATHERINE, GREEK ORTHODOX CHURCH OF BREVARD COUNTY, INC.



Principal Place of Business 5965 WICKHAM ROAD

Mailing Address

5965 WICKHAM ROAD

FILED Jan 11, 2007 8:00 am
Secretary of State 01-11-2007 90052 012 ****70.00

40001465

MELBOURNE, FL 32940-2003 MELBOURNE, FL 32940-2003													
Principal Place of Business - No P.O. Box # 3. Mailing Address													
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Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				01052007	Chg-NP	CR2E0	37 (12/06)		
City & State			City & State				4. FEI Number 59-15586	034	• •		plied For t Applicable		
Zip	Country Zip Countr				ntry		5. Certificate of	Status Desired		\$8.75 Add Fee Required			
	6. Name a	nd Address of Current I	Registere	d Agent				7. Name and A	ddress of New	Registered	Agent		
PANOUSES, KURT ESQ 140 6TH AVE, SUITE B INDIALANTIC, FL 32903					Name Street Address (P.O. Box Number is Not Acceptable)								
	,. 2 02												
		3				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. I am familiar with, and accept the obligations of registered agent.													
SIGNATURE		printed name of registered agent (and title if app	icable. (NOTE:	Registered	Agent signat	ure required	when reinstating)		DATE	-		
Filling Fee Is \$61.25 9. Election Campaign Fir								\$5.00 May Be			k payable to		
Due by May 1, 2007 Trust Fund Contributi					ontributi	on,		Added to Fees	Fic	orida Depa	rtment of St	ate	
10. OFFICERS AND DIRECTORS 11.					11.			ADDITIONS/CHAP	NGES TO OFFIC	ERS AND D	IRECTORS IN	10	
TITLE	PPCD			Delete	TITLE		PP				Change	Addition	
NAME STREET ADDRESS	[NAME STREE	ET ADDRESS	Sar:	poolaki,	ZOY T.	•				
CITY-ST-ZIP		NE, FL 32940				·ST-ZIP	503' Riverside Drive Melbourne Beach FL 3295)						
TITLE	VPD			☐ Delete	TITLE		VPt				Tichange	☐ Addition	
NAME	DIAMOND,	CHARLES			NAME	.	Rom	ian. Geo	rae		-	_	
STREET ADDRESS	3840 SHAD					et address	Roman, George 127 Sandpine Road Indialantic FL 32903						
CITY-ST-ZIP		NE, FL 32934		<u>_</u>	CITY	·ST-ZIP	Ind	ialan tic	FL 326	103			
TITLE	TT	DEMETRICS		☐ Delete	TITLE		50	ine			☐ Change	☐ Addition	
NAME Street Address	440 GREE	, DEMETRIOS NVIEW RD			NAME	ET ADDRESS	Ju	in C					
CITY-ST-ZIP	1	SLAND, FL 32952				ST-ZIP							
ППЦЕ	SD	·····		☐ Delete	TITLE		5 P				2 Change	☐ Addition	
NAME	LIGERAKIS	S, ADAMANTIA			NAME		N.C	nolas, J	ohn	_		_	
STREET ADDRESS												-C's	
		ET LAKES DR				ET ADDRESS		3 5. Ban		er Biv	d # 30	'	
CITY-ST-ZIP		ET LAKES DR SLAND, FL 32953	·		CITY-	ST-ZIP		3 5. Ban 0a Beac		er Biv 3293	31		
TITLE				☐ Delete	CITY-	ST-ZIP		3 5. Ban		er Biv 3293	Cl #L 30	Addition	
				☐ Delete	CITY- TITLE NAME	ST-ZIP		3 5. Ban		27 B)v 329:	31		
TITLE NAME				□ Delete	CITY- TITLE NAME STREE	ST-ZIP		3 5. Ban		er B)v 329:	31		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				☐ Delete	CITY- TITLE NAME STREE	ST-ZIP ET ADDRESS -ST-ZIP		3 5. Ban		3293	31		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME					CITY- TITLE NAME STREI CITY- TITLE NAME	ST-ZIP ET ADDRESS ST-ZIP		3 5. Ban		329:	□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					CITY- TITLE NAME STREE CITY- TITLE NAME STREE	ST-ZIP ET ADDRESS ST-ZIP		3 5. Ban		er Blv 329:	□ Change	Addition	

Indicated on this report or supplied with this lifting does not qualify for the exemptions contained in Chapter 119, Florida Statutes: I further certify that the mormation indicated on this report or suppliemental 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:

SATE SATE OF LAKE AND STATE OF SIGNING OFFICER OR DIRECTOR

8/07

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Zoy T. Sarpoolaki