FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -2 PM 4:25

DOCUMENT # 737605 (6)

1. Corporation Name

LADIES SOCIETY OF ST. SOPHIA CHURCH OF POLK COUNTY, INC.

Principal Place of Business	Mailing Address
1020 BRADBURY RD. P.O. BOX 7424 WINTER HAVEN FL 33880 US	P.O. BOX 7424 P.O. BOX 7424 WINTER HAVEN FL 33880 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/22/1976
3a. Date of Last Report: 04/18/1994
4. FEI Number: 59-1764065 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required.
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

TRAKAS, ANDREW P
123 AVENUE C S W
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	EMMANUILIDIS, ANNA	1.2 NAME	Carolyn Crikis	
STREET ADDRESS	291 HERNANDO DR SE	1.3 STREET ADDRESS	21 Oakwood Rd.	
CITY-ST-ZIP	WINTER HAVEN FL	1.4 CITY-ST-ZIP	Winter Haven, FL 33880	
TITLE	TD	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	JOHNSON, MARGARET	2.2 NAME	Tatiana Benda	
STREET ADDRESS	149 LOWELL RD	2.3 STREET ADDRESS	830 Sagamore St.	
CITY-ST-ZIP	WINTER HAVEN FL	2.4 CITY-ST-ZIP	Lakeland, FL 33803	
TITLE	SD	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	RIDGWAY, CINDY	3.2 NAME	Charlene Kallivrousis	
STREET ADDRESS	8425 WISPER TR	3.3 STREET ADDRESS	4331 Lake Buffum Rd.	
CITY-ST-ZIP	LAKELAND FL	3.4 CITY-ST-ZIP	Lake Wales, FL 33853	
TITLE	D	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	KATZARAS, HELEN	4.2 NAME	Mildred Nicoletos	
STREET ADDRESS	4511 SCOTTSWOOD DR	4.3 STREET ADDRESS	944 Reynolds Rd. Lot 341	
CITY-ST-ZIP	LAKELAND FL	4.4 CITY-ST-ZIP	Lakeland, FL 33801	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carolyn K. Crikis, President Carolyn K. Crikis Jan. 23, 1995 813-967-1634
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0088747