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NONPROFIT CORPORATION ANNUAL REPORT

1997



PLENIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #**1. Corporation Name

749935

(3)

## UNITED HELLENIC-AMERICAN VOTERS OF FLORIDA, INC.

Principal Place of Business  P. O. BOX 2354 CLEARWATER FL 34617  3. Date Incorporated or Qualified 11/28/1979  2. Principal Place of Business  2a. Mailing Address  4. FEI Number Applied For 59-3314342  Suite, Apt. #, etc.  Suite, Apt. #, etc.						
CLEARWATER FL 34817   CLEARWATER PL 34817-2354	Principal Place	e of Business	Mailing Address			WHI BIRIE BIRIE BERNI BERNI DIREC DIREC HAR
2. Principal Place of Business				354		
Sulle, April #, etc.					3. Date Incorporated or Qualified 11/28/1979	3a. Date of Last Report 05/23/1996
Solite, Apt. #, etc.    20		lace of Business	2a. Mailing Address	****		Applied For
27 City 8 State 28 City 8 State 29 Country 20 20 Country 20 20 State		# 010			58-33 14342	
22   20   20   20   20   20   20   20	22 27		<u> </u>		5. Certificate of Status Desired	
Zip Country 2	City & State	9	— ·		, , ,	\$5.00 May Be Added to Fees
POUMANIS, GEORGE 1070 MCLEAN ST DUNEDIN FI. 34698  11. Fursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the deploration 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 egent. I am familiar sup-mid accept the deploration of Scation's 157,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered egent. I am familiar sup-mid accept the deploration of Section 17,003, Florida Statutes.  11. Fursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered egent. I am familiar sup-mid accept the deploration of Section 17,003, Florida Statutes.  12.	Zip	<del>-</del>	<del>                                     </del>			
POUMAKIS, GEORGE 1070 MCLEAN ST DUNEDIN FL 34898    B2   Street Address (P Q Box Number Is Not Acceptable)				1301		
1070 MCLEAN ST DUNEDIN FL 34698  11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statues, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such chenge was authorized by the corporation's board of directors. I hereby accept the appointment are registered agent, or both, in the State of Florida. Such chenge was authorized by the corporation's board of directors. I hereby accept the appointment are registered agent, or both, in the State of Florida. Such chenge was authorized by the corporation's board of directors. I hereby accept the appointment are registered agent, or both, in the State of Florida. Statutes.  SIGNATURE						
## City FL 34696  ## City FL 45 Jp.Code ## C				82 Street Add		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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 agont, in maintain submit and small produce in the composition of the corporation's board of directors. I hereby accept the appointment as registered agont, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, in the maintain submit as registered agont, in the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, in the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, in the statement for the purpose of change in the significance of the appointment as registered agont, or both in the significance of the appointment as registered agont, or both in the significance of the appointment as registered agont, or both in the significance of the appointment as registered agont, or both in the significance of the appointment as registered agont, or both in the purpose of the appointment as registered agont, or both in the purpose of the appointment as registered agont, or both in the purpose of the appointment as registered agont, or both in the purpose of the appointment as registered agont, or purpose of the appointment as registered agont, or purpose of the appointment as registered agont, or purpose of the appointment as registered ag				83 17	T POINAM C	YEM
II. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, 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, 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, or both in the following section of 7.0503, Florida Statutes.  SIGNATURE  12.	00112011	'		1 DE 13	HOVT KICKEY	lot 1 7 - O - d -
SIGNATURE						FL 34655
SIGNATURE   Signator hybrory printed and size if sprincation   (NOTE Pegislamed Agent signature required when relevating)   DATE	11. Pursuant to	to the provisions of Sections 617.0 egistered agent, or both, in the Sta	poration submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered		
12. OFFICERS AND DIRECTORS  TITLE  PD	agent. I am ramiliar with and accept the obligations of, Section 617.0503, Florida Statutes					E-12-87
TITLE				E: Registered Agent signature requi	red when reinstating)	DATE
NAME   STREET ADDRESS   TROMAS   TRANS   TRA	·			····	ADDITIONS/CHANGES TO OFFIC	
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CITY-ST-ZIP				The state of the s		
TITLE						
NAME			DELETE	***		Change Addition
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ALCOHOL MARKET M				1		
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14. I do 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 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.

BT PLOUIRED

SIGNATURE:

**FILED** 

May 20 1997 8:00am

Secretary of State