

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90324 004 \*\*\*\*61.25

**DOCUMENT # 752870**

1. Entity Name

GREEK ORTHODOX CHURCH OF SAINT MARK OF BOCA RATON, FLORIDA, INC.



Principal Place of Business

2100 NW 51ST STREET  
BOCA RATON FL 33431

Mailing Address

2100 NW 51ST STREET  
BOCA RATON FL 33431

54031197



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3081241

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

JAMES A. BALLERANO JR. ESQ.  
1201 NE 8TH STREET  
DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent

Name FR. James Gavrilos

Street Address (P.O. Box Number is Not Acceptable)

2100 NW 51st St.

Boca Raton

City

Boca Raton

FL

Zip Code

33431

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

Fr. James Gavrilos

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	ELROY, CURTIS	
STREET ADDRESS	1246 SW 13TH DR.	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	PD	<input type="checkbox"/> Delete
NAME	PAPAMICHAEL, MICHAEL	
STREET ADDRESS	23217 BOCA CLUB COLONY CT	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	RUIO, KATHY	
STREET ADDRESS	716 SE 9TH ST.	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	DENNEY, THOMAS	
STREET ADDRESS	598 NW 10 CT	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MARDS, MICKEY	
STREET ADDRESS	11535 NW 75 MANOR	
CITY-ST-ZIP	PARKLAND FL 33076	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mitchell, Girard	
STREET ADDRESS	2896 Quantum Lakes DR.	
CITY-ST-ZIP	Boynton Beach, FL 33436	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Panagos, Gregory	
STREET ADDRESS	21273 Rock Ridge DR.	
CITY-ST-ZIP	Boca Raton, FL 33428	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRENO, SUSAN	
STREET ADDRESS	8079 Saw Palmetto Lane	
CITY-ST-ZIP	Boynton Beach, FL 33436	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Boulos, Riad	
STREET ADDRESS	9406 NW 38th St.	
CITY-ST-ZIP	Coral Springs, FL 33065	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 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.

SIGNATURE:

Susan E Bruno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 28, 2004 5617429600

Date

Daytime Phone #