

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755824

FILED  
Mar 03, 2006  
Secretary of State

Entity Name: ST. NICHOLAS GREEK ORTHODOX CATHEDRAL OF TARPON SPRINGS, INC.

**Current Principal Place of Business:**

36 N PINELLAS AVE  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

**Current Mailing Address:**

17 E. TARPON AVENUE  
TARPON SPRINGS, FL 34689 US

**New Mailing Address:**

FEI Number: 59-0704732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANIAS, NIKITAS MR.  
17 E. TARPON AVENUE  
TARPON SPRINGS, FL 34689 US

**Name and Address of New Registered Agent:**

PATSALIDES, HARRY MR.  
17 E. TARPON AVENUE  
TARPON SPRINGS, FL 34689 US

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: HARRY PATSALIDES

03/03/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MANIAS, NIKITAS MR.  
Address: 3483 WOODRIDGE PKWY  
City-St-Zip: PALM HARBOR, FL 34684 US

Title: VP ( ) Delete  
Name: IOANNIS, EMANUEL MR.  
Address: 312 ATHENS STREET  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: TD ( ) Delete  
Name: PATSALIDES, HARRY MR.  
Address: 70 WILLOWOOD LANE  
City-St-Zip: OLDSMAR, FL 34677 US

Title: SD ( ) Delete  
Name: CHRISTU, NIKKI MS.  
Address: 413 N. WALTON AVENUE  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: PATSALIDES, HARRY MR.  
Address: 73 WILLOWOOD LANE  
City-St-Zip: OLDSMAR, FL 34677 US

Title: VP (X) Change ( ) Addition  
Name: SISOIS, COSTAS MR.  
Address: 516 WAYFARER DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: TD (X) Change ( ) Addition  
Name: ANDROPOULOS, HARRY MR.  
Address: 907 BAYSHORE DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ASTD ( ) Change (X) Addition  
Name: SOTIRAKIS, BETTY MS.  
Address: 19201 WIND DANCER STREET  
City-St-Zip: LUTZ, FL 33558 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HARRY PATSALIDE

PRES

03/03/2006

Electronic Signature of Signing Officer or Director

Date