

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 761620 (4)

1. Corporation Name

GREEK-AMERICAN COMMUNITY ASSOCIATION, INC.

FILED

95 MAY 31 AM 9:05

RECEIVED MAY 31 1995
FLORIDA DEPARTMENT OF STATE

800001504379
-06/02/95--01025--015
*****68.75 *****68.75

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/27/1982
3a. Date of Last Report 05/01/1994
4. FEI Number 59-2951413
Applied For Not Applicable

Principal Place of Business Mailing Address
2525 SOUTH 25TH STREET 2525 SOUTH 25TH STREET
FT. PIERCE FL 34981 FT. PIERCE FL 34981

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

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 (RS 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KINDEL, JOYCE E.
953 OLD DIXIE HIGHWAY B-6
VERO BEACH FL 32960

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

Signature typed to print name of registered agent and the # applicable

(NOTE: Registered Agent signature required when registering)

(S1)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	BLEKAS, GEORGE	12 NAME	BLEKAS, GEORGE
STREET ADDRESS	248 NW BENTLEY CIRCLE	13 STREET ADDRESS	248 NW Bentley Circle
CITY, ST, ZIP	PORT ST. LUCIE FL	14 CITY, ST, ZIP	Port St. Lucie FL
TITLE	VP	21 TITLE	☒ Change ☐ Addition
NAME	DEMOPAULOS, GEORGE	22 NAME	Michael Griwas
STREET ADDRESS	6531 SE FEDERAL HIGHWAY	23 STREET ADDRESS	1965 4th Ave
CITY, ST, ZIP	STUART FL	24 CITY, ST, ZIP	VERO BEACH, FL 32963
TITLE	VP	31 TITLE	☐ Change ☐ Addition
NAME	BEASLEY, RON	32 NAME	Beasley Ron
STREET ADDRESS	3526 NO ALA	33 STREET ADDRESS	3526 No. Ala
CITY, ST, ZIP	VERO BEACH FL	34 CITY, ST, ZIP	VERO BEACH FL
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	TIMON, PETER	42 NAME	Timon Peter
STREET ADDRESS	7380 S. HIGHWAY A1A	43 STREET ADDRESS	7380 S Highway A1A
CITY, ST, ZIP	TINSEN BEACH FL	44 CITY, ST, ZIP	Tinzen Beach, FL
TITLE	T	51 TITLE	☒ Change ☐ Addition
NAME	PLANITIS, ANTHONY	52 NAME	William Malinos
STREET ADDRESS	23-40 AQUILAS AVE	53 STREET ADDRESS	776 14 Ave
CITY, ST, ZIP	PALM BAY FL	54 CITY, ST, ZIP	VERO BEACH FL 32962
TITLE	T	61 TITLE	☐ Change ☐ Addition
NAME	GEORGIADIS, PETER	62 NAME	Georgiades Peter
STREET ADDRESS	217 VIRADE AVE	63 STREET ADDRESS	217 Virade Ave.
CITY, ST, ZIP	POST ST. LUCIE FL	64 CITY, ST, ZIP	PORT ST. LUCIE FL

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 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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44 95 462821-0126
(Type) (Signature) S