## 2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 764098 Oct 10, 2012
Secretary of State

Entity Name: THE GREEK ORTHODOX COMMUNITY OF WEST CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

4705 W. GULF TO LAKE HWY LECANTO, FL 34461 US

Current Mailing Address: New Mailing Address:

P.O. BOX 241

INVERNESS, FL 34451 US

FEI Number: 59-2424269 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KATSOURIS, CONSTANTINA MS 13265 SW 67TH LANE OCALA, FL 34481 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: PRES

Name: KATSOURIS, CONSTANTINA MS

Address: 13265 SW 67TH LANE
City-St-Zip: OCALA, FL 34481 US

Title: VP

Name: DALMANIERAS, ALEX MR. Address: 2634 E. MARCIA STREET City-St-Zip: INVERNESS, FL 34453

Title: S

Name: MASOUD, PAMELA DR
Address: 2828 N FOLKSTONE LOOP
City-St-Zip: HERNANDO, FL 34442

Title: T

Name: TZIVANIS, DEMETRIOS MR. Address: 5672 W. JUSTIN COURT City-St-Zip: HOMOSASSA, FL 34448

Title:

Name: KAFES, EMMANUEL MR.

Address: 1381 W. SKYVIEW CROSSING DR

City-St-Zip: HERNANDO, FL 34442

Title: [

Name: KANARIS, GEORGE MR Address: 9 BYRSONIMA COURT WEST City-St-Zip: HOMOSASSA, FL 34446

I hereby 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 all other like empowered.

SIGNATURE: CONSTANTINA KATSOURIS PRES 10/10/2012

FILED