FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATION

*FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 27 PM 3:58

DOCUMENT # 765049 (2)

1. Corporation Name

AMERICAN FRIENDS OF THE GREEK ORTHODOX PATRIARCH ATE OF JERUSALEM, INC.

Principal Place of Business	Mailing Address
201 S. BISCAYNE BLVD. SUITE 2620 MIAMI FL 33131	201 S. BISCAYNE BLVD. SUITE 2620 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/19/1982
3a. Date of Last Report: 06/16/1994
4. FEI Number: 59-2249035 ☐ Applied For ☐ Not Applicable
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 IRS 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

2. Principal Place of Business
21 255 Alhambra Circle
22 Suite, Apt. #, etc. Suite 730
23 City & State Coral Gables, FL
24 Zip 33134
25 Country Dade

2a. Mailing Address
26 255 Alhambra Circle
27 Suite, Apt. #, etc. Suite 730
28 City & State Coral Gables, FL.
29 Zip 33134
30 Country U.S.A

9. Name and Address of Current Registered Agent

YANAKAKIS, BASIL S
~~201 BISCAYNE BLVD., #2620~~
~~MIAMI FL 33131~~

10. Name and Address of New Registered Agent

81 Name: Basil S. Yanakakis
82 Street Address (P.O. Box Number is Not Acceptable): 255 Alhambra Circle
83: Suite 730
84 City: Coral Gables FL 85 Zip Code: 33134

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	☐ Change ☐ Addition
NAME	PAYIATIS, PHILEMON REV	1.2 NAME	
STREET ADDRESS	12250 NW 2ND AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	☑ Change ☐ Addition
NAME	YANAKAKIS, BASIL S	2.2 NAME	
STREET ADDRESS	201 S. BISCAYNE BLVD., #2620	2.3 STREET ADDRESS	255 Alhambra Circle #730
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Coral Gables, FL. 33134
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	NEOFOTISTOS, GEORGE REV	3.2 NAME	
STREET ADDRESS	329 ROMANO AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	☐ Change ☐ Addition
NAME	ROUSSAKIS, EMMANUEL	4.2 NAME	
STREET ADDRESS	15845 S.W. 87TH AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	XIFARAS, ROBERT L.	5.2 NAME	
STREET ADDRESS	63 PROSPECT AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	WESTSHORE HARBOUR MA	5.4 CITY-ST-ZIP	
TITLE	SD	6.1 TITLE	☑ Change ☐ Addition
NAME	EFTHIMIOU, GUS JR.	6.2 NAME	
STREET ADDRESS	201 SO. BISCAYNE BLVD.	6.3 STREET ADDRESS	255 Alhambra Circle #730
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	Coral Gables, FL. 33134

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 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.

SIGNATURE: Basil S Yanakakis, President Jan. 18, 1995 (305) 443-7097
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0007011