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FILED
Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 765049 (2)
1. Corporation Name
**AMERICAN FRIENDS OF THE GREEK ORTHODOX PATRIARCH
ATE OF JERUSALEM, INC.**



Principal Place of Business 255 ALHAMBRA CIRCLE 1125 CORAL GABLES FL 33134 US	Mailing Address 255 ALHAMBRA CIRCLE 1125 CORAL GABLES FL 33134 US
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3. Date Incorporated or Qualified 10/19/1982	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 59-2249035	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent YANAKASIS, BASIL S. 255 ALHAMBRA CIRCLE SUITE 730 CORAL GABLES FL 33134	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE TD	NAME CHERETIS, JOHN	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 337 71 ST.	CITY-ST-ZIP MIAMI BEACH FL	1.2 NAME	
TITLE PD	NAME YANAKAKIS, BASIL S	1.3 STREET ADDRESS	
STREET ADDRESS 255 ALHAMBRA CIRCLE #730	CITY-ST-ZIP CORAL GABLES FL	1.4 CITY-ST-ZIP	
TITLE D	NAME HARALAMBIDES, JOHN	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3135 SW 3RD AVE	CITY-ST-ZIP MIAMI FL	2.2 NAME	
TITLE VD	NAME ROUSSAKIS, EMMANUEL	2.3 STREET ADDRESS	
STREET ADDRESS 15845 S.W. 87TH AVENUE	CITY-ST-ZIP MIAMI FL	2.4 CITY-ST-ZIP	
TITLE D	NAME REV. KALAVRITINOS, SOTIRIS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 94 GRAND VIEW AVE.	CITY-ST-ZIP QUINCY MA	3.2 NAME	
TITLE SD	NAME EFTHIMIOU, GUS JR.	3.3 STREET ADDRESS	
STREET ADDRESS 255 ALHAMBRA CIRCLE #730	CITY-ST-ZIP CORAL GABLES FL	3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	4.2 NAME	
TITLE	NAME	4.3 STREET ADDRESS	
TITLE	NAME	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	
TITLE	NAME	5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	6.2 NAME	
TITLE	NAME	6.3 STREET ADDRESS	
TITLE	NAME	6.4 CITY-ST-ZIP	

14. 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 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* 4/20/98 305-443-9297

CR2E037 (10/97)