2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# 765411

Entity Name: THE ST. JOHN GREEK ORTHODOX DAY SCHOOL FOUNDATION, INC.

Current Principal Place of Business:

2418 SWANN AVE
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

2418 SWANN AVE
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-1170684 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAVOUKLIS, CHRIS M
115 SOUTH NEWPORT AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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:	VD	( ) Delete
Name:	MITCHELL, JOHN	
Address:	13914 PEPPERREL DR	
City-St-Zip:	TAMPA, FL 33624	
Title:	STD	( ) Delete
Name:	LARKIN, JR., JAMES J	
Address:	4614 S. FERDINAND AVE.	
City-St-Zip:	TAMPA, FL 33611	
Title:	DP	( ) Delete
Name:	XENICK, MIKE	
Address:	3918 GRANDA ST	
City-St-Zip:	TAMPA, FL 33629	
Title:	TD	( ) Delete
Name:	CHAOVNDAS, MARINA	
Address:	10456 ASHLEY OAKS DR	
City-St-Zip:	RIVERVIEW, FL 33569	
Title:	D	( ) Delete
Name:	KRISTY, SIMON	
Address:	2614 PARKLAND BLVD	
City-St-Zip:	TAMPA, FL 33609	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: KRISTY SIMON D 04/26/2007

Electronic Signature of Signing Officer or Director — Date