2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 31, 2005 **DOCUMENT#769185** Secretary of State

Entity Name: ST. ELIZABETH GREEK ORTHODOX CHURCH OF GAINESVILLE, INC.

Current Principal Place of Business: New Principal Place of Business: 5129 NW 53 AVENUE GAINESVILLE, FL 32653 US **Current Mailing Address: New Mailing Address:** 5129 NW 53 AVENUE GAINESVILLE, FL 32653 US FEI Number: 29-2461060 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: KASTARIS, PANAGIOTIS REV 5129 NW 53RD AVE GAINESVILLE, FL 32653 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CURTA, FLORIN Name: Name: 6827 NW 37TH TERRACE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: VPD () Delete Title: () Change () Addition AGRIOS, GEORGE Name: Name: Address: 222 SW 131ST ST. Address: City-St-Zip: GAINESVILLE, FL 32669 City-St-Zip: Title: SD Title: () Change () Addition () Delete HAYES, ANN Name: Name: 9925 NW 23RD LANE Address: Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: Title: () Delete Title: () Change () Addition Name: METRICK, RAY Name: Address: P.O BOX 502 Address: City-St-Zip: FORT WHITE, FL 32038 City-St-Zip: Title: () Delete Title: () Change () Addition ARVANITIS, LUCAS Name: Name: 3126 NW 38TH STREET Address: Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: Title: () Delete Title: () Change () Addition KOSTANDARIS, GAIL Name: Name: Address: P.O. BOX 757 Address: BELL, FL 32619 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAY METRIC / MARIN SMILLOV Т 07/31/2005