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Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 769457 (3)

1. Corporation Name

CHIOS SOCIETY AGIA MARKELLA OF FLORIDA, INC.



Principal Place of Business

Mailing Address

P.O. BOX 0074
TARPON SPRINGS FL 34688-0074

P.O. BOX 0074
TARPON SPRINGS FL 34688-0074

3. Date Incorporated or Qualified

07/19/1983

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

IOANNIDIS, EMANUEL
201 FOREST GROVE BLVD.
PALM HARBOR FL 34683

81 Name

EURIPIDES TSAPRAZIS

82 Street Address (P.O. Box Number is Not Acceptable)

644 ISLAND WAY #608

83

84

City

CLEARWATER

FL

85

Zip Code
33767

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

EURIPIDES TSAPRAZIS

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2-16-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME TSAPRAZIS, EURIPIDES
STREET ADDRESS 644 ISLAND WAY
CITY-ST-ZIP CLEARWATER FL

DELETE

TITLE SD
NAME HAYES, BETTY
STREET ADDRESS 3707 CANTRELL ST
CITY-ST-ZIP NEW PORT RICHEY FL 34852

DELETE

TITLE TD
NAME IOANNIDIS, EMANUEL
STREET ADDRESS 201 FOREST GROVE BLVD
CITY-ST-ZIP PALM HARBOR FL 34683

DELETE

TITLE SD
NAME BATIDES, THERESA
STREET ADDRESS 1372 OVERLEG DR
CITY-ST-ZIP DUNEDIN FL

DELETE

TITLE VD
NAME MOSCHOURIS, PETER
STREET ADDRESS 1006 BOWSPRIT LN
CITY-ST-ZIP HOLIDAY FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

KULA COROS, TREASURER
3653 MADISON ST
NEW PORT RICHEY, FL 34652

V
GEORGE GBORGIOU
213 LEAFWOOD DRIVE
TARPON SPRINGS, FL 34689

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:

EURIPIDES TSAPRAZIS

PRESIDENT 2-16-98 813-446-4451

CP2E037 (10/97)