

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769457

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** CHIOS SOCIETY AGIA MARKELLA OF FLORIDA, INC.

**Current Principal Place of Business:**

P.O. BOX 0074  
TARPON SPRINGS, FL 346880074

**New Principal Place of Business:**

4440 COUNTY BREEZE DRIVE  
NEW PORT RICHEY, FL 34653

**Current Mailing Address:**

P.O. BOX 0074  
TARPON SPRINGS, FL 346880074

**New Mailing Address:**

4440 COUNTY BREEZE DRIVE  
NEW PORT RICHEY, FL 34653

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COHLIDS, JOANNE  
2900 COVE CAY DR. #2F  
CLEARWATER, FL 33760 US

**Name and Address of New Registered Agent:**

KALAFATIS, NICK TRV  
4440 COUNTY BREEZE DRIVE  
NEW PORT RICHEY, FL 34653 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: NICK KALAFATIS

01/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KALAFATIS, NICK  
Address: 4440 COUNTY BREEZE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TRV ( ) Delete  
Name: KALRFATIS, NICK  
Address: 4440 COUNTY BREEZE DR  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: CS ( ) Delete  
Name: BATIDES, THERESA  
Address: 1372 OVERLEA DR  
City-St-Zip: DUNEDIN, FL 34698

Title: ES ( ) Delete  
Name: PONIROS, MARY  
Address: 185 WOODCUTTER LANE  
City-St-Zip: PALM HARBOR, FL 34683

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TRV (X) Change ( ) Addition  
Name: KALAFATIS, NICK  
Address: 4440 COUNTY BREEZE DR  
City-St-Zip: NEW PORT RICHEY, FL 34653

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: NICK KALAFATIS

TRV

01/06/2009

Electronic Signature of Signing Officer or Director

Date