

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUN 16 PM 1:32
SECRET
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DOCUMENT # 17000000003783

1. Corporation Name

FRIENDS OF THE ATHENIAN ACADEMY, INC.

2. Principal Office Address

1070 MCLEAN ST.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 2610

Suite, Apt. #, etc.

City & State

DUNEDIN

City & State

DUNEDIN
FLORIDA

Zip

34698

Country

PINELLAS

Zip

34697

Country

PINELLAS

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

GEORGE POUMAKIS

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

1070 MCLEAN ST.

Suite, Apt. #, Etc.

City

DUNEDIN

State

FL

Zip Code

34698

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

George Poumakis
REGISTERED AGENT MUST SIGN

Date

6/15/05

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRESIDENT	GEORGE POUMAKIS	1070 MCLEAN ST.,	DUNEDIN, FL. 34698
VICE PRESIDENT	GEORGE KANTARAKIS	1430 GULF BLVD,	CLEARWATER, FL. 33767
PAST PRESIDENT	CHRIS KOULOUVARIS	1249 LOTUS PATH,	CLEARWATER, FL. 33756
TREASURER	PENELOPE VELOUDOS	938 LEXINGTON DR.	DUNEDIN FL. 34698
SECRETARY	DESPINA DIAMANTAKOS	2033 INDIGO TR.	DUNEDIN, FL. 34698
BOARD MEMBER	ANNA VOURLIDOMIS	4706 BAYCREST DR.	TAMPA, FL. 33615

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

George Poumakis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/15/05 727-244-4694 CEE

Daytime Phone #

CR2E081 (01/05)