

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002606

FILED  
Jan 13, 2008  
Secretary of State

Entity Name: TREASURE COAST AHEPA #479, INC.

## Current Principal Place of Business:

775 SW MUNJACK CIR  
PORT ST LUCIE, FL 34986

## New Principal Place of Business:

## Current Mailing Address:

775 SW MUNJACK CIR  
PORT ST LUCIE, FL 34986

## New Mailing Address:

FEI Number: 65-1091370

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ASPROMALLIS, DEMETRIS  
775 SW MUNJACK CIR  
PORT ST LUCIE, FL 34986 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: P ( ) Delete  
Name: OMIROS, ZAMBIGADIS  
Address: P.O. BOX 3061  
City-St-Zip: VERO BEACH, FL 32964

Title: SD ( ) Delete  
Name: DAGEENAKIS, JOHN A  
Address: 16511 ESSEX RD N  
City-St-Zip: PLATTEVILLE, CO 80651

Title: V ( ) Delete  
Name: CRIST, JAMES  
Address: 4365 GATOR TRACE LN  
City-St-Zip: FORT PIERCE, FL 34982

Title: T ( ) Delete  
Name: ASPROMALLIS, DEMETRIS  
Address: 775 MUNJACK CIR  
City-St-Zip: PORT SAINT LUCIE, FL 34986

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ZAMBIGADIS, OMIROS  
Address: P.O. BOX 3061  
City-St-Zip: VERO BEACH, FL 32964

Title: SD (X) Change ( ) Addition  
Name: ASPROMALLIS, DEMETRIS  
Address: 16511 ESSEX RD N  
City-St-Zip: PLATTEVILLE, CO 80651

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: DEMETRIS ASPROMALLIS

SD

01/13/2008

Electronic Signature of Signing Officer or Director

Date