## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # N02072** 

(9)

GREEK ORTHODOX CHURCH OF ST. DEMETRIOS, INC.

Principal Place of Business Mailing Address 129 NORTH HALIFAX AVENUE 129 NORTH HALIFAX AVENUE DAYTONA BEACH FL 32118-4250 DAYTONA BEACH FL 32118-4250 3. Date Incorporated or Qualified 03/21/1984 3a. Date of Last Report 01/29/1996 4. FEI Number 59-2368661 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FOREST, MICHAEL J. 82 Street Address (P.O. Box Number is Not Acceptable) 105 NORTH HALIFAX AVENUE 83 DAYTONA BEACH FL 32018 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1506. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE VD Change Addition TITLE 1.1 TITLE KOUTOUZIS, IRENE NAME 1.2 NAME 2500 N. HALIFAX AVE. STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL 32118 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE TD 2.1 TITLE FOREST, MICHAEL J. 2.2 NAME NAME 105 N. HALIFAX AVE STREET ADDRESS 2.3 STREET ADDRESS DAYTONA BCH FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition TITLE 3.1 TITLE ☐ Change CONSTANT, SAM NAME 3.2 NAME 2204-B S PENINSULA AVE STREET ADDRESS 3.3 STREET ADDRESS DAYTONA BEACH FL 32118 CITY-ST-ZIP 3.4. CITY - ST - ZIP

14. I do 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 73 if changed, or on an attachment with an address.

4.1 TITLE

4. 2 NAME

5.1 TITL€

5.2 NAME

6.1 TITLE

62 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 City - St - ZiP

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

TITLE NAME

TITLE

STREET ADDRESS

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CITY-ST-ZIP

LASKOS, GUS

**84 TROPICAL FALLS** 

ORMOND BEACH FL

Michael Q. Jourst 1911

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1-10-97 (904) 252-6012 Date Date Deptine Phone 90002283

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**FILED** 

Jan 21 1997 8:00am

Secretary of State

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