


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90023 019 ****61.25

DOCUMENT # N02072

1. Entity Name
GREEK ORTHODOX CHURCH OF ST. DEMETRIOS, INC.



Principal Place of Business
**129 NORTH HALIFAX AVENUE
 DAYTONA BEACH, FL 32118-4250**

Mailing Address
**129 NORTH HALIFAX AVENUE
 DAYTONA BEACH, FL 32118-4250**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

40091400



02292008 Chg-NP CR2E037 (12/06)

4. FEI Number
NOT APPLICABLE

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

KOULOURIS, NICK
1200 FLORAL SPRINGS BLVD.
UNIT 5203
PORT ORANGE, FL 32129

7. Name and Address of New Registered Agent

Name
TED BALEDDES

Street Address (P.O. Box Number is Not Acceptable)
4211 GULL COVE

City
NEW SMYRNA BEACH

FL Zip Code
32169

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE TED BALEDDES Ted Baleddes DATE 3-4-08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KOUTOUZIS, IRENE 2500 N. HALIFAX AVE. DAYTONA BEACH, FL 32118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KOULOURIS, NICK 1200 FLORAL SPRINGS BLVD., 5203 PORT ORANGE, FL 32129	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GANAGAN, RENNE 2204 S.S. PENINSULA DR DAYTONA BEACH, FL 32118	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD THEODORE, ANGELO 5 OLD MACON DR. ORMOND BEACH, FL 32174	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT COIDAKIS, DEMETRIOS 6 STALLION WAY ORMOND BEACH, FL 32174	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TED BALEDDES 4211 GULL COVE NEW SMYRNA BEACH, FL 32169	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ATHAS, KONETAS 4210 S. PENINSULA DR WILBUR BY THE SEA, FL 32127	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MARCEL POMAS 113 TROPIC BIRD CT. DAYTONA BEACH, FL 32119	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT PETE KARANITOS 1810 JOHN ANDERSON DR ORMOND BEACH, FL 32176	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ted Baleddes 3-4-08 386-252-6023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #