## 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000008181

FILED Dec 24, 2004 Secretary of State

Entity Name: ATHENIAN ACADEMY, OF PASCO COUNTY INC.

	Current Principal Place of Business:		New Principal Place of Business:	
	DALE DRIVE , FL 34691			
urrent N	failing Address:	New Mailing A	ddress:	
.O. BOX OLIDAY	3007 , FL 34690			
accordar	r: 59-3571143 FEI Number Applied For ( ) nce with s. 607.193(2)(b), F.S., the corporation did not			
ame and	d Address of Current Registered Agent:	Name and Add	ress of New Registered Agent:	
070 MCL	IS, GEORGE .EAN STREET I, FL 34698 US			
	e named entity submits this statement for the pure of Florida.	rpose of changing its rec	gistered office or registered agent, or both,	
GNATU				
	Electronic Signature of Registered Ager	t	Date	
FFICER	S AND DIRECTORS:	ADDITIONS/CH	HANGES TO OFFICERS AND DIRECTOR	
le: ıme: ldress: ty-St-Zip:	D ( ) Delete POUMAKIS, GEORGE 1070 MCLEAN STREET DUNEDIN, FL 34698	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
	D ( ) Delete MARKOULAKIS, PANTELIS	Title: Name:	( ) Change ( ) Addition	
me: dress:	3544 LANDALE HOLIDAY, FL 34691	Address: City-St-Zip:		
le: me: dress: y-St-Zip: le: me: dress: y-St-Zip:	3544 LANDALE	Address:	()Change ()Addition	
me: dress: y-St-Zip: le: me: dress:	3544 LANDALE HOLIDAY, FL 34691  D ( ) Delete GIANNET, STANLEY M PHD PHCC WEST CAMPUS 10230 RIDGE ROAD	Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	
me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress:	3544 LANDALE HOLIDAY, FL 34691  D () Delete GIANNET, STANLEY M PHD PHCC WEST CAMPUS 10230 RIDGE ROAD NEW PORT RICHEY, FL 346545199  D () Delete POUMAKIS, LEMONIA 1070 MCLEAN STREET	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:		

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: MARIA PITELIS D 12/24/2004