2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2006
Secretary of State

DOCUMENT# N03000008181

Entity Name: ATHENIAN ACADEMY, OF PASCO COUNTY INC.

Current Principal Place of Business:

1070 MCLEAN STREET
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3007
HOLIDAY, FL 34690

New Mailing Address:

FEI Number: 59-3571143 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

POUMAKIS, GEORGE
1070 MCLEAN STREET
DUNEDIN, FL 34698 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:	D	( ) Delete
Name:	POUMAKIS, GEORGE	
Address:	1070 MCLEAN STREET	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	D	( ) Delete
Name:	HATZIS, GEORGE	
Address:	7330 NEVA LA	
City-St-Zip:	PORT RICHEY, FL 34668	
Title:	D	( ) Delete
Name:	MOROS, JAMES	
Address:	5329 CHARLES STREET	
City-St-Zip:	NEW PORT RICHEY, FL 34652	
Title:	D	( ) Delete
Name:	SLOUMAS, CALIOPE	
Address:	KING ARTHUR DRIVE	
City-St-Zip:	PORT RICHEY, FL 34668	
Title:	D	( ) Delete
Name:	BOUZOS, SOPHIA	
Address:	7608 CAMELOT ROAD	
City-St-Zip:	PORT RICHEY, FL 34668	
Title:	D	( ) Delete
Name:	ANGELATOS, SOTIR	
Address:	109 BAYVIEW BLVD	
City-St-Zip:	OLDSMAR, FL 34677	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: GEORGE POUMAKIS D 02/17/2006
Electronic Signature of Signing Officer or Director — Date