

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001174

FILED
Jan 25, 2006
Secretary of State

Entity Name: PAN-HELLENIC SOCIETY OF OCALA, INC.

Current Principal Place of Business:

2560 S.W. 82 PLACE
OCALA, FL 34476

New Principal Place of Business:

2560 S.W. 87TH PLACE
OCALA, FL 34476

Current Mailing Address:

2560 S.W. 82 PLACE
OCALA, FL 34476

New Mailing Address:

P.O. BOX 5871
OCALA, FL 34478

FEI Number: 58-2683188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANOS, IRENE
2560 S.W. 82 PLACE
OCALA, FL 34476 US

Name and Address of New Registered Agent:

MANOS, IRENE
2560 S.W. 87 PLACE
OCALA, FL 34476 US

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: IRENE MANOS

01/25/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MANOS, IRENE
Address: 2560 SW 87TH PLACE
City-St-Zip: OCALA, FL 34476

Title: VP () Delete
Name: STOUKIDES, HELEN
Address: 4719 N. LENA DR
City-St-Zip: BEVERLY HILLS, FL 344654451

Title: S () Delete
Name: FINTON, MARIA
Address: 13215 SW 52ND LANE RD
City-St-Zip: OCALA, FL 34481

Title: T () Delete
Name: RUCKER, DEMETRA
Address: 38 HAMLOCK PASS
City-St-Zip: OCALA, FL 34472

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOWLING, STEVE
Address: 14156 S.E. 36 AVE.
City-St-Zip: SUMMERFIELD, FL 34491

Title: VP (X) Change () Addition
Name: ZOTOS, TOM
Address: 12297 S.E. 177 LOOP
City-St-Zip: SUMMERFIELD, FL 34491

Title: RS (X) Change () Addition
Name: CHRYSTIE, KATHY
Address: 5381 S.W. 33 ST.
City-St-Zip: OCALA, FL 34474

Title: CS (X) Change () Addition
Name: DEAN, NANCY
Address: 14731 S.E. 1 AVE. RD.
City-St-Zip: SUMMERFIELD, FL 34491

Title: T () Change (X) Addition
Name: DAVIS, JACK
Address: 2059 N.E. 42 ST.
City-St-Zip: OCALA, FL 34479

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: IRENE MANOS

RA

01/25/2006

Electronic Signature of Signing Officer or Director

Date