

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002559

FILED
Feb 17, 2009
Secretary of State

Entity Name: GREEK ORTHODOX MISSION OF GREATER OCALA, INC.

Current Principal Place of Business:

2240 SE 5TH ST
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

PO BOX 5871
OCALA, FL 34478

New Mailing Address:

FEI Number: 56-2433116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANTAZIS, ELLEN
2240 SE 5TH ST
OCALA, FL 34471 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: P () Delete
Name: PANTAZIS, COOLEY G
Address: 2240 SE 5TH ST
City-St-Zip: OCALA, FL 34471

Title: VP () Delete
Name: DAVIS, JOHN R
Address: 2059 NE 42ND ST
City-St-Zip: OCALA, FL 34479

Title: S () Delete
Name: DEAN, NANCY
Address: 14731 SE 1ST AVE RD
City-St-Zip: SUMMERFIELD, FL 34491

Title: T () Delete
Name: MARINICH, OLEG
Address: 5355 NW 26TH LANE
City-St-Zip: OCALA, FL 34482

Title: AT () Delete
Name: PANTAZIS, ELLEN
Address: 2240 SE 5TH PLACE
City-St-Zip: OCALA, FL 34471

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

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 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: OLEG G. MARINICH

T

02/17/2009

Electronic Signature of Signing Officer or Director

Date