


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N05000000059		
1. Entity Name GREEK ORTHODOX CHURCH OF THE ANNUNCIATION, INC.		
Principal Place of Business 12250 NW 2ND AVENUE NORTH MIAMI, FL 33168 US	Mailing Address 12250 NW 2ND AVENUE NORTH MIAMI, FL 33168 US	



04222008 No Chg-NP CR2E037 (4/06)

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4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEREIRA, JOSEPH A JR
 10300 SW 72 ST
 470J
 MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D VALAVANIS, ANGELO 12250 NW 2ND AVENUE NORTH MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D RIGALOS, GEORGIA 12250 NW 2ND AVENUE NORTH MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D POULOS, EMMANUEL 12250 NW 2ND AVENUE NORTH MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D VLASTARAS, MARINIKI 12250 NW 2ND AVENUE NORTH MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/19/08-80004-025 61.25

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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: Angelo Valavanis ANGELO VALAVANIS 4/23/08 305-331-6439
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #