2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06595

FILED Feb 06, 2008 Secretary of State

Entity Name: PROMETHEAS PAN HELLENIC CULTURAL CENTER OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 123 EAST ORANGE STREET TARPON SPRINGS, FL 34689 **Current Mailing Address: New Mailing Address:** 123 EAST ORANGE STREET TARPON SPRINGS, FL 34689 FEI Number: 59-2617611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VASSILIOU, EFFIE VASSILIOU, EFFIE 2364 BENT TREE RD AD 2325 3030 POINTER DRIVE PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 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: 02/06/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KOUTSOPANAGOS, PETROS Name: Name: Address: 3600 E EISENHOWER DR Address: City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: Title: () Delete Title: (X) Change () Addition VASSILIOU, EFFIE Name: Name: VASSILIOU, EFFIE Address: 524 WAYFARER DR Address: 3030 POINTER DRIVE City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: PALM HARBOR, FL 34683 Title: () Delete Title: () Change () Addition KARIOFILIES, HELEN Name: Name: Address: 5640 MIRANDA Address: City-St-Zip: HOLIDAY, FL 34690 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LAZIDES, ALEXANDRA Name: 13325 BRIGHAM LANE Address: Address: City-St-Zip: HUDSON, FL 34667 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: EFFIE VASSILIOU Ρ 02/06/2008