

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006497

FILED  
Apr 18, 2012  
Secretary of State

**Entity Name:** THE GREEK CHILDREN'S FUND OF FLORIDA, INC.

**Current Principal Place of Business:**

10816 U.S. HIGHWAY 19 N.  
SUITE 105  
PORT RICHEY, FL 34668 US

**New Principal Place of Business:**

**Current Mailing Address:**

10816 U.S. HIGHWAY 19 N.  
SUITE 105  
PORT RICHEY, FL 34668 US

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

PSETAS, GEORGE C  
10816 U.S. HIGHWAY 19 N.  
SUITE 105  
PORT RICHEY, FL 34668 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  
Name: SARAVANOS, MARYANN  
Address: 4928 SOUTHSORE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: 1VP  
Name: GEORGIADES, ANGELA  
Address: 9830 SAGO POINT DRIVE  
City-St-Zip: LARGO, FL 33777 US

Title: 2VP  
Name: RIVERS, ADAMANTIA D  
Address: 5116 SOUTHSORE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: SEC  
Name: WILSON, TINA  
Address: 10709 HYANNIS COURT  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: T  
Name: POTAWSKY, MARYANN  
Address: 8121 WINTHROP DRIVE  
City-St-Zip: PORT RICHEY, FL 34668 US

I hereby 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 all other like empowered.

SIGNATURE: MARYANN SARAVANOS

PRES

04/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date