2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12513

FILED Apr 27, 2006 Secretary of State

Entity Name: ST. SOPHIA GREEK ORTHODOX CHURCH OF POLK COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

ST SOPHIA GREEK ORTHODOX CHURCH 1030 BRADBURY ROAD WINTER HAVEN, FL 33880

Current Mailing Address: New Mailing Address:

ST SOPHIA GREEK ORTHODOX CHURCH PO BOX 7424 WINTER HAVEN, FL 33880

FEI Number: 59-2628379 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:

ROUSSOS, ROULA KATZARAS, NICHOLAS S TREASUR 1155 MAPLE AVE 6656 ROYAL FOREST DR. LAKELAND, FL 33830 US LAKELAND, FL 33811 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: NICHOLAS S. KATZARAS 04/27/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PF () Delete
 Title:
 PRES (X) Change () Addition

 Name:
 EMANOILIDIS, MARY
 Name:
 TALLEY, ELAINE PRES.

 Address:
 121 LAKE TROUT DR
 Address:
 277 BELL TOWER CROSSING W

City-St-Zip: RIVERGREEN/ AVON PARK, FL 33825 City-St-Zip: KISSIMMEE, FL 37459

Title: Title: (X) Change () Addition () Delete APOSTOLOS, GEORGE T Name: MILOR, JAMES R VP Name: Address: 704 LAKE ARIANA BLVD Address: 407 VILLAGE CIRCLE SW City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: WINTER HAVEN, FL 33880

Title: () Delete Title: (X) Change () Addition THOMAS, CONSTANTINA KATZARAS, NICHOLAS S TREA Name: Name: 575 EAST CENTRAL AVE Address: Address: 6656 ROYAL FOREST DR. City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: LAKELAND, FL 33811

Title: T (X) Delete Title: () Change () Addition

 Name:
 ROUSSOS, ROULA
 Name:

 Address:
 1155 MAPLE AVE
 Address:

 City-St-Zip:
 BARTOW, FL 33830
 City-St-Zip:

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: NICHOLAS S. KATZARAS TREA 04/27/2006