2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State
02-03-2003 90069 047 ****61.25

DOCUMENT # N30728

1. Entity Name
RETIRED GREEK ORTHODOX CLERGY OF AMERICA, INC.

90016152

Principal Place of Business	Mailing Address
1480 SHERIDAN ST. APT. B16 HOLLYWOOD FL 32084 US	1480 SHERIDIAN ST. APT. B16 HOLLYWOOD FL 32084 US

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
6799 BISMARK RD	6799 BISMARK RD
Suite, Apt. #, etc.: SUITE I	Suite, Apt. #, etc.: SUITE I
City & State: COLORADO SPRINGS, CO	City & State: COLORADO SPRINGS, CO
Zip: 80922 Country: USA	Zip: 80922 Country: USA

4. FEI Number 65-0124250 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PHILEMON PAYIATIS 1480 SHERIDAN ST. APT. B16 HOLLYWOOD FL 32084	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CAMS, WILLIAM REV 4712 MARSEILLE PL METAIRIE LA 70002	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES. REV. EVAGORAS CONSTANTINIDES 9433 ARTHUR ST. CROWN POINT, IN 46307
				☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PAYIATIS, PHIL 1480 SHERIDAN ST., APT. B16 HOLLYWOOD FL 33020	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. REV. WILLIAM G. GAINES 4712 MARSEILLES PLACE METAIRIE LA 70002
				☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MEKRAS, DEMOSTHENES 153 SW 22ND RD. MIAMI FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC'Y REV. JAMES T. ADAMS 59 SAN MIGUEL WAY NOVATO, CA 94945
				☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PAPADEAS, GEORGE 917 VALENCIA DR. S.DAYTONA BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREAS. REV. CONSTANTINE J. RAPTIS 4651 CANNA DR. LAS VEGAS, NV 89122
				☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR REV. PHIL PAYIATIS 1480 SHERIDAN ST. APT. B16 HOLLYWOOD, FL 33020
				☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR REV. GEORGE PAPADEAS 917 VALENCIA DR. SO. DAYTONA BEACH, FL 32019
				☒ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [signature] REV. CONSTANTINE J. RAPTIS TREAS JAN 23, 2003 (719) 550-8900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #