2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45617

FILED Apr 23, 2009 Secretary of State

Entity Name: THE GREEK INDEPENDENCE DAY PARADE COMMITTEE OF TAMPA BAY AREA, INC.

Current Principal Place of Business: P.O. BOX 891 TARPON SPRINGS, FL 34688 Current Mailing Address: P.O. BOX 891 TARPON SPRINGS, FL 34688			New Principal	New Principal Place of Business: #A - 109 S. BAYVIEW BLVD. OLDSMAR, FL 34677 New Mailing Address: #A - 109 S. BAYVIEW BLVD. OLDSMAR, FL 34677	
			New Mailing A		
FEI Number	r: 59-3087475	FEI Number Applied For()	FEI Number Not Applicable	e () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Add	Name and Address of New Registered Agent:		
SOTIAIOS, AGELATOS A-109 SOUTH BAYVIEW BLVD OLDSMAR, FL 34677 US			A-109 SOÚTH E	SOTIRIOS, AGELATOS A-109 SOUTH BAYVIEW BLVD OLDSMAR, FL 34677 US	
	e named entity e of Florida.	submits this statement for the	ourpose of changing its reg	gistered office or registered agent, or both,	
SIGNATURE: SOTIRIOS AGELATOS				04/23/2009	
	Electror	nic Signature of Registered Ag	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CH	HANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	LAZIDES, ALE 13325 BRIGHA	M LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AGELTOS, SO A-109 SOUTH I	BAYVIEW BLVD	Address: A-10	(X) Change () Addition ELATOS, SOTIRIOS 19 SOUTH BAYVIEW BLVD SMAR, FL 34677	
Title: Name: Address: City-St-Zip:	POULLA, MARI 909 PENINSUL		Title: Name: Address: City-St-Zip:	() Change () Addition	
	Т () Delete	Title:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PANAGEAS, GI PO BOX 361 CRYSTAL BEA	US	Name: Address: 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: SOTIRIOS AGELATOS VP 04/23/2009