

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90454 013 ****70.00

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1. Entity Name

**ORTHODOX BROTHERHOOD OF ST. SYMEON THE NEW
THEOLOGIAN, INC.**

Principal Place of Business

**244 N HOLIDAY
MIRAMAR BEACH FL 32550
US**

Mailing Address

**276 N HOLIDAY
MIRAMAR BEACH FL 32550**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7108718

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STEPHANOU, EUSEBIUS A.
276 N HOLIDAY RD
MIRAMAR BEACH FL 32550**

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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

TITLE **D** ☐ Delete
NAME **ROUSSO, DAVID**
STREET ADDRESS **207 HOLLIS AVE**
CITY-ST-ZIP **PANAMA CITY FL 32401**

TITLE **D** ☐ Delete
NAME **PASCHALDIS, NIKOS**
STREET ADDRESS **11427 MEADOW CREEK RD**
CITY-ST-ZIP **EL CAJON CA 92020**

TITLE **D** ☐ Delete
NAME **MCKNIGHT, SYMEON**
STREET ADDRESS **710 LEGION DR APT C5**
CITY-ST-ZIP **DESTIN FL 32541**

TITLE **P** ☐ Delete
NAME **STEPHANOU, EUSEBIUS**
STREET ADDRESS **276 N HOLIDAY RD.**
CITY-ST-ZIP **DESTIN FL 32550**

TITLE **D** ☐ Delete
NAME **ABBATE, JOSEPH**
STREET ADDRESS **219 AMM CIR #A**
CITY-ST-ZIP **DESTIN FL 32541**

TITLE **V** ☐ Delete
NAME **KANIARIS, JOHN**
STREET ADDRESS **6347 CASTLE HILL DR**
CITY-ST-ZIP **MIDDLETOWN OH 45044**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **ABBATE, CHARLES**
STREET ADDRESS **320 N. MARION ST.**
CITY-ST-ZIP **OAK PARK, IL 60302**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Change ☐ Addition
NAME **ABBATE JOSEPH**
STREET ADDRESS **219 ANN CIR. #A**
CITY-ST-ZIP **DESTIN FL 32541**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Rev. Eusebius Stephanou **REV. EUSEBIUS STEPHANOU** **4-9-06 (850) 837-1771**