

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46623

FILED
May 31, 2007
Secretary of State

Entity Name: ORTHODOX BROTHERHOOD OF ST. SYMEON THE NEW THEOLOGIAN, INC.

Current Principal Place of Business:

244 N HOLIDAY
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

276 N HOLIDAY
MIRAMAR BEACH, FL 32550

New Mailing Address:

FEI Number: 23-7108718 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STEPHANOU, EUSEBIUS A.
276 N HOLIDAY RD
MIRAMAR BEACH, FL 32550 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: D () Delete
Name: ROUSSO, DAVID
Address: 207 HOLLIS AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: PASCHALDIS, NIKOS
Address: 11427 MEADOW CREEK RD
City-St-Zip: EL CAJON, CA 92020

Title: D () Delete
Name: MCKNIGHT, SYMEON
Address: 710 LEGION DR APT C5
City-St-Zip: DESTIN, FL 32541

Title: P () Delete
Name: STEPHANOU, EUSEBIUS
Address: 276 N HOLIDAY RD.
City-St-Zip: DESTIN, FL 32550

Title: D () Delete
Name: ABBATE, JOSEPH
Address: 219 ANN CIR #A
City-St-Zip: DESTIN, FL 32541

Title: V () Delete
Name: KANIARIS, JOHN
Address: 6347 CASTLE HILL DR
City-St-Zip: MIDDLETOWN, OH 45044

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ABBATE, CHARLES I
Address: 320 N. MARION ST.
City-St-Zip: OAK PARK, IL 60302

Title: D (X) Change () Addition
Name: ELYCE, MOUSKONDIS
Address: 841 JUNIPERPOINT DR
City-St-Zip: SALT LAKE CITY, UT 84103

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: REV. FR. EUSEBIUS STEPHANOU

P

05/31/2007

Electronic Signature of Signing Officer or Director

Date