

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 09, 2004 8:00 am
Secretary of State

09-09-2004 90012 023 ****61.25

DOCUMENT # N48864

1. Entity Name

**AMERICAN FOUNDATION OF GREEK LANGUAGE AND
CULTURE, INC.**



Principal Place of Business

**1202 PARRILLA DE AVILA
TAMPA FL 33613-5219
US**

Mailing Address

**1202 PARRILLA DE AVILA
TAMPA FL 33613-5219
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (4/04)

4. FEI Number

59-3305557

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TSOKOS, CHRIS P.
1202 PARRILLA DE AVILA
TAMPA FL 33613**

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 September 8, 2004**

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 PD
NAME TSOKOS, CHRIS P. ☐ Delete
STREET ADDRESS 1202 PARRILLA DE AVILA
CITY-ST-ZIP TAMPA FL 33613

TITLE VD
NAME BALIS, JOHN ☐ Delete
STREET ADDRESS 2627 CLARK ROAD
CITY-ST-ZIP TAMPA FL 33618

TITLE TD
NAME HALKIAS, DEMETRIOS ☐ Delete
STREET ADDRESS 10413 BUTIA PLACE
CITY-ST-ZIP TAMPA FL 33618

TITLE IC
NAME MAROULIS, NICHOLAS J ☐ Delete
STREET ADDRESS 1501 GULF BLVD #207
CITY-ST-ZIP CLEARWATER FL 33767

TITLE AA
NAME IPPOKRATIS, KANTZIOS ☐ Delete
STREET ADDRESS 342 FERN CLIFF AVE CLIFF
CITY-ST-ZIP TAMPA FL 33617

TITLE SD
NAME HATSIOS, JOHN G ☐ Delete
STREET ADDRESS 1410 AMESBURY COURT
CITY-ST-ZIP NEW PORT RICHEY FL 34655

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Edu.Programs Coordinator ☐ Change ☒ Addition
NAME Kantzios, Niki
STREET ADDRESS 342 Fern Cliff Ave.
CITY-ST-ZIP Temple Terrace, FL 33617

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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 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:

Chris P. Tsokos
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-23-04 (813) 961-1892

Date

Daytime Phone #