2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N49540

Entity Name: GREEK ORTHODOX COMMUNITY - ST. DEMETRIOS, INC.

Current Principal Place of Business:

129 N HALIFAX AVE
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

129 N HALIFAX AVE
DAYTONA BEACH, FL 32118

New Mailing Address:

FEI Number: 59-2368661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALEDES, TED
4211 GULL COVE
NEW SMYRNA BEACH, FL 32169 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:	PD	( ) Delete
Name:	KOUTOULIS, IRENE	
Address:	2500 N. HALIFAX AVE	
City-St-Zip:	DAYTONA BEACH, FL 32118	
Title:	TD	( ) Delete
Name:	BALEDES, TED	
Address:	4211 GULL COVE	
City-St-Zip:	NEW SMYRNA BEACH, FL 32169	
Title:	SD	( ) Delete
Name:	KOMETAS, ATHAS	
Address:	4210 S PENINSULA DR	
City-St-Zip:	WILBUR BY THE SEA, FL 32127	
Title:	VD	( ) Delete
Name:	PSONAS, MARCEL	
Address:	113 TROPIC BIRD CT	
City-St-Zip:	DAYTONA BEACH, FL 32119	
Title:	AT	( ) Delete
Name:	KARAMITOS, PETE	
Address:	1810 JOHN ANDERSON DR	
City-St-Zip:	ORMOND BEACH, FL 32176	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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: TED BALEDES TD 04/14/2009

Electronic Signature of Signing Officer or Director — Date