

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 28 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000005477 (4)

1. Corporation Name

ARGONAUTS - ORGANIZATION FOR SOCIAL, ENVIRONMENTAL, CULTURAL, AND ARTISTIC PLANNING OF GREECE -

Principal Place of Business

Mailing Address

3555 GLOSSY IBIS CT.
PALM HARBOR FL 34683

3555 GLOSSY IBIS CT.
PALM HARBOR FL 34683

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

11/02/1994

4. FEI Number

Applied For

59-3284943

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

21 1601 Keene Road
Suite, Apt. #, etc.

26 1601 Keene Rd
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Clearwater, FL 34616

28 Clearwater, FL 34616

24 Zip Country
25 Pinellas

29 Zip Country
30 Pinellas

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZACHARPOULOS, KALLINIKOS S
3555 GLOSSY IBIS CT.
PALM HARBOR FL 34683

81 Name
Zacharopoulos, Kallinikos S.

82 Street Address (P.O. Box Number is Not Acceptable)

83 1601 Keene Road
Clearwater

84 City

FL

85 Zip Code
34616

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ZACHARPOULOS, KALLINIKOS S
STREET ADDRESS 3555 GLOSSY IBIS CT.
CITY - ST - ZIP PALM HARBOR FL 34683

1.1 TITLE PD
1.2 NAME Zacharopoulos, Kallinikos S.
1.3 STREET ADDRESS 1601 Keene Road
1.4 CITY - ST - ZIP Clearwater, FL 34616
☒ Change ☐ Addition

TITLE SD
NAME DASKALOPOULOS, GEORGE
STREET ADDRESS 19 HARBOR OAKS CIR.
CITY - ST - ZIP SAFETY HARBOR FL 34695

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE TD
NAME LAMBROS, HARRY
STREET ADDRESS 3705 36TH AVE. W.
CITY - ST - ZIP BRADENTON FL 34205

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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; that I am a shareholder, officer, director, or trustee empowered to execute this report as required by Chapter 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in Block 14 if new.

SIGNATURE

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number