

FILE NOW: FILING FEE IS \$61.25

FILED  
May 15 1998 8:00am  
Secretary of State

|  |   |   |
|--|---|---|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|---|

DOCUMENT # **N95000003077 (3)**

1. Corporation Name

**HELLENIC SOCIETY PAIDIA OF FLORIDA, INCORPORATED**

Principal Place of Business

Mailing Address

P.O. BOX 1606  
TARPON SPRINGS FL 34688-1606

P.O. BOX 1606  
TARPON SPRINGS FL 34688-1606



3. Date Incorporated or Qualified

**06/26/1995**

4. FEI Number

**22-3528692**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**KONDIS, PETER  
1163 ROLLING OAKS AVENUE  
TARPON SPRINGS FL 34689**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE  
NAME **COSTIS, GEORGE A**  
STREET ADDRESS **3333 US HWY 19 NO.**  
CITY-ST-ZIP **HOLIDAY FL 34691**

TITLE **VP** ☐ DELETE  
NAME **PSOMAS, MARIOS**  
STREET ADDRESS **1013 CONNETICUT RD**  
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE **D** ☐ DELETE  
NAME **CONDIS, PETER**  
STREET ADDRESS **1163 ROLLING OAKS**  
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE **D** ☐ DELETE  
NAME **SISOIS, KOSTAS**  
STREET ADDRESS **516 WAYFARER DR**  
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE **D** ☐ DELETE  
NAME **MATSAGOS, IRENE**  
STREET ADDRESS **3750 LIGHTHOUSE WAY**  
CITY-ST-ZIP **HOLIDAY FL 34691**

TITLE **ST** ☐ DELETE  
NAME **KARIOFILIS, HELEN**  
STREET ADDRESS **5840 MIRADA DR**  
CITY-ST-ZIP **HOLIDAY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

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

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

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

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

14. 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 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **George A. Costis** **GEORGE A. COSTIS P. 5/1/98 813 724-1938**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0068784

CR2E037 (10/97)