2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004815

FILED Apr 11, 2008 Secretary of State

Entity Name: ST. DEMETRIOS GREEK ORTHODOX SPECIAL EVENTS OF BROWARD COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

815 NORTHEAST 15TH AVENUE FORT LAUDERDALE, FL 33304

Current Mailing Address: New Mailing Address:

815 NORTHEAST 15TH AVENUE FORT LAUDERDALE, FL 33304

FEI Number: 59-1235704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TANGALAKIS, HARRY 5571 BAYVIEW DRIVE

FT. LAUDERDALE, FL 33308 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition

FT. LAUDERDALE, FL 33312

RAPANOS, DEMETRIOS

2641SW 58TH MANOR

 Title:
 TD
 () Delete
 Title:

 Name:
 MAIORANA, ANTONIO
 Name:

 Address:
 3321 N 34TH ST
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:

Title: P () Delete Title: PD (X) Change () Addition
Name: TANGALAKIS, HARRY Name: TANGALAKIS, HARRY
Address: 5571 BAYVIEW DRIVE
Address: 5571 BAYVIEW DRIVE

Address: 5571 BAYVIEW DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33308

Address: 5571 BAYVIEW DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: VPD () Delete Title: **VPD** (X) Change () Addition MICHAELIDES, ARES NICHOLS, CHRISTOPHER Name: Name: 2465 PROVENCE CIRCLE Address: Address: 20 ROYAL PALM WAY #501 City-St-Zip: WESTON, FL 33327 City-St-Zip: BOCA RATON, FL 33432

Title: SD () Delete Title: () Change () Addition

 Name:
 IOANNOU, JOHN JR.
 Name:

 Address:
 8821 SW 8TH SREET
 Address:

 City-St-Zip:
 PLANTATION, FL 33324
 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: HARRY TANGALAKIS PD 04/11/2008