

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 03, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # N96000002459  
 1. Entity Name  
 BROTHERHOOD OF EPIROTES OF FLORIDA "THE SOULI", INC.



Principal Place of Business  
 2140 SUNNYDALE BOULEVARD  
 CLEARWATER, FL 34625

Mailing Address  
 2140 SUNNYDALE BOULEVARD  
 CLEARWATER, FL 34625

**DO NOT WRITE IN THIS SPACE**



02122004 No Chg-NP CR2E037 (10/03)

4. FEI Number  
 59-3375468

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ZARVALAS, ZISIMOS  
 1857 GLENVILLE DRIVE  
 CLEARWATER, FL 33765

**DO NOT WRITE IN THIS SPACE**

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: *Zarvalas* DATE: *2-27-04*

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000075659  
 03/03/04-80069-005 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ZARVALAS, ZISIMOS 1857 GLENVILLE DR CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD TSIMAS, NICK 7830 2ND AVE S ST PETERSBURG, FL 33707
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GOGAS, ELENI 6760 3RD AVE. NORTH SAINT PETERSBURG, FL 33710
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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: *Zarvalas Zisimos Zarvalas - 2-27-04 (727) 799-4588*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #