

**2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 17, 2014  
Secretary of State**

DOCUMENT# N98000002737

Entity Name: NISYROS SOCIETY OF FLORIDA, INC.

**Current Principal Place of Business:**

1647 SAND HOLLOW LANE  
PALM HARBOR, FL 34683 US

**New Principal Place of Business:**

**Current Mailing Address:**

1647 SAND HOLLOW LANE  
PALM HARBOR, FL 34683 US

**New Mailing Address:**

1844 N. HIGHLAND  
CLEARWATER, FL 33765 US

FEI Number: 59-3512447      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DARAS, POPI  
C/O NISYROS SOCIETY OF FLA.  
1647 SAND HOLLOW LANE  
PALM HARBOR, FL 34683 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: POPI DARAS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: DARAS, POPI  
Address: 1647 SAND HOLLOW LANE  
City-St-Zip: PALM HARBOR, FL 34683 US

Title: P  
Name: INTZES, NICHOLAS  
Address: 1844 N. HIGHLAND  
City-St-Zip: CLEARWATER, FL 33765 US

Title: VP  
Name: DIMITRIUS, POPI  
Address: 445 HOLLY HILL RD  
City-St-Zip: OLDSMAR, FL 34677

Title: T  
Name: PAPAEMANUEL, EMANUEL  
Address: 115 TOURNAMENT DR  
City-St-Zip: SPRING HILL, FL 34608

I hereby 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 all other like empowered.

SIGNATURE: NICHOLAS INTZES

P

11/17/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date