## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## May 08, 2006 8:00 am Secretary of State DOCUMENT # N98000004444 05-08-2006 90290 012 \*\*\*\*61.25 ANNUNCIATION OF THE THEOTOKOS GREEK ORTHODOX MONASTERY, INC. Principal Place of Business Mailing Address 13486 NW HWY 225 13486 NW HWY 225 REDDICK FL 32686 REDDICK FL 32686 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State Applied For City & State 4. FEI Number 65-0854161 Not Applicable Zip Country\_ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NESTORAS, CONSTANTINA D Street Address (P.O. Box Number is Not Acceptable) 13486 NW HWY 225 REDDICK FL 32686 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE そくなんこと はなばまとび てるのか 14 . 79 J . 50 ... FILE NOW: FEE IS \$61.25 Due By May 1, 2006 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State OFFICE OF STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE TETLE 🗶 Change ☐ Addition NESTORAS, CONSTANTINA NAME PANAGIOTA, VLACHODIMOU NAME STREET ADDRESS 13486 NW HWY 225 STREET ADDRESS 134X6 NW Amy 225 REDDICK FL 32686 CITY-ST-ZIP CITY-ST-ZIP Reddick FL 32686 TITLE ☐ Delete TITLE Addition Change PANAGIOTIDIS, YASILIKI VASSILOPOULOS, CONSTANTINA NAME NAME 13486 NW HMY 225 13486 NW HWY 225 STREET ADDRESS STREET ADDRESS REDDICK FL 32686 CITY-ST-ZIP CITY-ST-ZIP Reddick FL TITLE ☐ Delete TITLE Change Addition NAME NESTORAS, CONSTANTINA NAME 13486 NW HWY 225 STREET ADDRESS STREET ADDRESS CITY-ST-7/P REDDICK FL 32686 CITY-ST-7IP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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.

TITLE

NAME

STREET ADDRESS CITY+ST-ZIP

☐ Delete

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

onstantina Nectoras

4-28-06

**FILED** 

Change

☐ Addition