2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004450

FILED Jan 22, 2009 Secretary of State

Entity Name: PANAGIA VLAHERNON GREEK ORTHODOX MONASTERY, INC.

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

12600 WEST HIGHWAY 318 WILLISTON, FL 32696

Current Mailing Address: New Mailing Address:

12600 WEST HIGHWAY 318 WILLISTON, FL 32696

FEI Number: 59-3525228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ALEXOPOULOS, ANTHONY
12600 WEST HIGHWAY 318
WILLISTON, FL 32696 US
ALEXOPOULOS, MODESTO G
12600 WEST HIGHWAY 318
WILLISTON, FL 32696 US
WILLISTON, FL 32696 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: MODESTO ALEXOPOULOS 01/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 ALEXOPOULOS, ANTHONY M
 Name:
 ALEXOPOULOS, MODESTO G

 Address:
 12600 WEST HIGHWAY 318
 Address:
 12600 WEST HIGHWAY 318

 City-St-Zip:
 WILLISTON, FL 32696
 City-St-Zip:
 WILLISTON, FL 32696

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

 Name:
 KATSIS, DIMITRIOS K
 Name:

 Address:
 12600 WEST HIGHWAY 318
 Address:

 City-St-Zip:
 WILLISTON, FL 32696
 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

 Name:
 DOUVIS, JOHN'S
 Name:

 Address:
 12600 WEST HWY 318
 Address:

 City-St-Zip:
 WILLISTON, FL 32696
 City-St-Zip:

Title: PR () Delete Title: () Change () Addition

 Name:
 GEORGIOU, ACHILLES
 Name:

 Address:
 12600 WEST HWY 318
 Address:

 City-St-Zip:
 WILLISTON, FL 32696
 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: MODESTO ALEXOPOULOS PD 01/22/2009