2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 28, 2000 8:00 am Secretary of State DOCUMENT # **N9900000153** 1. Entity Name ST. NICHOLAS LADIES PHILOPTOCHOS, INC. 04-28-2000 90057 001 ****61.25 Principal Place of Business Mailing Address 20 NORTH PINELLAS AVENUE 30 NORTH RING AVENUE, SUITE 400 TARPON SPRINGS FL 34689-4304 TARPON SPRINGS FL 34689 E0076600 2. Principal Place of Business 3. Mailing Address 23 E. Tarpan Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-3555094 lampa Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KLIMIS. GEORGE N 30 NORTH RING AVENUE; SUITE 400 -TARPON SPRINGS FL 34689 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. SIGNATURE DATE Signature, typed or printed name of registered ag itle if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Addition ☐ Delete TITLE TITLE STAYRAKIS STAVRAKIS, ANDIE NAME NAME 410 GRAND BOULEVARD TARPON SPRINGS FL 34689 410 GRAND BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS FL 34689 CITY-ST-ZIF S TITLE ☐ Change ☐ Delete TITLE KONTOGEORGE, ANGIE CRITIKOS, PANAGIOTA NAME NAME 723 HIDDEN LAKE DRIVE 731 TESSIER DRIVE STREET ADDRESS STREET ADDRESS TARPON SPRINGS FL 34689 CITY-ST-ZIP CITY-ST-ZIP tarpon springs FL 34689 ARFARAS DUCHESS Thange Addition 621 FAST ORANGE STREET TARPON. STANGE Delete, TITLE ARFARAS, DUCHESS NAME NAME 621 EAST ORANGE STREET STREET ADDRESS STREET ADDRESS ARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete ZANTOPOULOS, BESSIE NAME 300 SOUTH FLORIDA AVENUE #400F STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS FL 34689 CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE STAVRAKIS, FALYA NAME 704 BAYSHORE DRIVE STREET ADDRESS STREET ADDRESS TARPON SPRINGS FL 34689 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE CHAGARIS, KALOTINA 486 EAST PINE STREET CHAGARIS, KALOTINA NAME NAME 426 EAST PINE STREET STREET ADDRESS STREET ADDRESS TARPÓN SPRINGS FL 34689 CITY-ST-ZIP SPRINGS FL CITY-ST-ZIP <u>TARPON</u> 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