


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 14, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N99000002790</b>	
<b>1. Entity Name</b> IOANNIS KOUKOUZELIS ASSOCIATION OF GREEK ORTHODOX BYZANTINE CHANTERS AND FRIENDS OF BYZANTINE MU	

<b>Principal Place of Business</b> 2632 VELVENTOS DR. CLEARWATER, FL 33761	<b>Mailing Address</b> 2632 VELVENTOS DR. CLEARWATER, FL 33761
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01232004 No Chg-NP CR2E037 (10/03)

<b>4. FEI Number</b> 59-3628219	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  PAPPAS, GEORGE G 901 N. HERCULES AVE., STE. D CLEARWATER, FL 33765	<b>DO NOT WRITE IN THIS SPACE</b>
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**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.**

<b>SIGNATURE</b> <small>Signature, typed or printed name of registered agent and title if applicable</small>	<small>(NOTE: Registered Agent signature required when reinstating)</small>	<small>DATE</small>
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<b>Filing Fee is \$61.25 Due by May 1, 2004</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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<b>10. OFFICERS AND DIRECTORS</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	PD PAPPAS, GEORGE E 2632 VELVENTOS DR. CLEARWATER, FL 33761
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	SD MINAS, LIRISTIS 690 ISLAND WAY #1112 CLEARWATER, FL 33767
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	VD GIOVANIS, PERRY A 2520 SOUTHPOINTE DR DUNEDIN, FL 34698
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	D LAMBROS, SOCRATES 644 ISLAND WAY, UNIT 408 CLEARWATER, FL 33767
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	D LIADIS, JOHN N 665 KIRKLAND CIRCLE DUNEDIN, FL 34698
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	TD ZARAVALAS, ZISIMOS 1857 GLENVILLE DRIVE CLEARWATER, FL 33765

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02/16/04-80045-012 61.25

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**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.**

<b>SIGNATURE:</b> 	<b>2/10/04</b>	<b>727-298-8171</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>