2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2009
Secretary of State

DOCUMENT# N99000005161

Entity Name: HELLENIC CULTURAL ASSOCIATION OF THE TAMPA BAY AREA, INC.

Current Principal Place of Business:

3908 W SAN MIGUEL ST.
TAMPA, FL 33629

New Principal Place of Business:

3908 W SAN MIGUEL ST.
TAMPA, FL 33629 US

Current Mailing Address:

3908 W SAN MIGUEL ST.
TAMPA, FL 33629

New Mailing Address:

3908 W SAN MIGUEL ST.
TAMPA, FL 33629 US

FEI Number: 59-3593916 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARAS, GUS
3908 W SAN MIGUEL ST.
TAMPA, FL 33629 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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: PARAS, MARINA
Address: 3908 W SAN MIGUEL ST.
City-St-Zip: TAMPA, FL 33629

Title: CPD ( ) Delete
Name: PARAS, GUS
Address: 3908 W SAN MIGUEL ST.
City-St-Zip: TAMPA, FL 33629

Title: VP ( ) Delete
Name: BOBATAS, GEORGE
Address: 1245 N. FLORIDA AVE
City-St-Zip: TARPON SPRINGS, FL 33689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: GUS PARAS CPD 02/21/2009

Electronic Signature of Signing Officer or Director — Date