

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 17, 2006
Secretary of State**

DOCUMENT# N99000006180

Entity Name: ST. NICHOLAS GREEK ORTHODOX CHURCH, INC.

Current Principal Place of Business:

2525 SOUTH 25TH STREET
FORT PIERCE, FL 34981

New Principal Place of Business:

Current Mailing Address:

2525 SOUTH 25TH STREET
FORT PIERCE, FL 34981

New Mailing Address:

FEI Number: 59-1270920 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECONOMYS, PETER
2950 S. 25TH STREET
FT. PIERCE, FL 34981 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: P () Delete
Name: CAVOORIS, SHIRLEY
Address: 785 S.E. WHITMORE
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: VP () Delete
Name: DAGEENAKIS, JOHN
Address: 4236 SW MALLARD CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: S () Delete
Name: LOHSE, NICHOLAS
Address: 9652 SW GRANADA CT
City-St-Zip: PALM CITY, FL 34990

Title: T () Delete
Name: ECONOMYS, PETER
Address: 2950 S. 25TH STREET
City-St-Zip: FT. PIERCE, FL 34981

Title: AT () Delete
Name: TIMON, ANGELICE
Address: 7380 SOUTH OCEAN DRIVE APT #717
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOFIKITIS, KOSTAS
Address: 2181 S.E. BOWIE STREET
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: VP (X) Change () Addition
Name: CAVOORIS, SHIRLEY
Address: 785 S.E. WHITMORE
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: S (X) Change () Addition
Name: SERKIN, CHRISTINE
Address: 6906 CABANA LANE
City-St-Zip: FT. PIERCE, FL 34951

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 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: PETER ECONOMYS

T

03/17/2006

Electronic Signature of Signing Officer or Director

Date