

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S06884

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** COUNTRY PIZZA INN, INC.

**Current Principal Place of Business:**

25856 U.S. 19 NORTH  
CLEARWATER, FL 33763 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 15809  
CLEARWATER, FL 337665809 US

**New Mailing Address:**

P.O. BOX 14557  
CLEARWATER, FL 33766 US

**FEI Number:** 59-3033727

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALIMONOS, ARTHUR  
3419 OAK CREEK DR E  
CLEARWATER, FL 33761 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  
Name: ALIMONOS, ARTHUR  
Address: 3419 OAK CREEK DR E  
City-St-Zip: CLEARWATER, FL 33761

Title: S  
Name: ALIMONOS, ANGELIKY  
Address: 3419 OAK CREEK DR E  
City-St-Zip: CLEARWATER, FL 33761

Title: T  
Name: ALIMONOS, NICK  
Address: 1653 WATER OAK DR  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP  
Name: ALIMONOS, CONSTANTINOS  
Address: 4859 CROSS POINTE DRIVE  
City-St-Zip: OLDSMAR, FL 34677

Title: CFO  
Name: KARAPATEAS, BESSIE A  
Address: 2461 HIDDEN PINE LANE  
City-St-Zip: CLEARWATER, FL 33761

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CONSTANTINOS ALIMONOS

VP

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date