

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V73179

FILED
Apr 28, 2009
Secretary of State

Entity Name: ATHENIAN GARDEN OF ST. PETERSBURG, INC.

Current Principal Place of Business:

6940 22ND AVENUE NORTH
ST. PETERSBURG, FL 33707

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 40811
ST. PETERSBURG, FL 33743 US

New Mailing Address:

FEI Number: 59-3148439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOGAS, SPIRIDON
6940 22ND AVE. N.
ST. PETERSBURG, FL 33710 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: GOGAS, SPIRIDON
Address: 6940 22ND AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL

Title: V () Delete
Name: GOGAS, EVANGELOS
Address: 6940 22 AVE. NO.
City-St-Zip: ST PETE, FL

Title: S () Delete
Name: GOGAS, ELENI
Address: 6940 22 AVE. NO.
City-St-Zip: ST. PETE, FL

Title: T () Delete
Name: GOGAS, CHRISTINA
Address: 6940 22 AVE NO.
City-St-Zip: ST PETE, FL

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:

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

SIGNATURE: SPIRIDON GOGAS

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date