

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**Oct 16, 2009**  
**Secretary of State**

DOCUMENT# N02000004509

**Entity Name:** CENTRAL FLORIDA CHRISTIAN ASSEMBLY, INC.

**Current Principal Place of Business:**

1908 S OAK ST  
SEFFNER, FL 33584

**New Principal Place of Business:**

**Current Mailing Address:**

3015 PANTHER DR.  
LAKELAND, FL 33813

**New Mailing Address:**

**FEI Number:** 04-3689936      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GEORGE, KASEY  
1104 CAMPHOR GLEN CT  
VALRICO, FL 33594 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: MATHEW, VANOJ PASTOR  
Address: 3015 PANTHER DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: S ( ) Delete  
Name: GEORGE, KASEY  
Address: 1104 CAMPHOR GLEN CT  
City-St-Zip: VALRICO, FL 33594

Title: T ( ) Delete  
Name: JOSEPH, THOMAS O  
Address: 3843 HORIZON HILL DRIVE  
City-St-Zip: LAKELAND, FL 33813 US

Title: D ( ) Delete  
Name: PAUL, BILLY  
Address: 631 TUSCANNY ST  
City-St-Zip: BRANDON, FL 33511 US

Title: D ( ) Delete  
Name: CHANDY, RAJU  
Address: 11820 MANGO GROVES BLVD  
City-St-Zip: SEFFNER, FL 33584 US

Title: D ( ) Delete  
Name: CHANDY, THOMAS  
Address: 1118 LAKE SHORE DR  
City-St-Zip: SEFFNER, FL 33584

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: JAMES, VARGHESE  
Address: 10606 GRAND RIVIERE DR  
City-St-Zip: TAMPA, FL 33647 US

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: JAMES VARGHESE

T

10/16/2009

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

\_\_\_\_\_  
Date