2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# N05000000418

Entity Name: ST. JOHN'S CSI CONGREGATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

10893 NW 45TH ST
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

10893 NW 45TH ST
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 04-3804153 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: OOMMEN, GEORGE
Address: 10893 NW 45TH ST
City-St-Zip: CORAL SPRINGS, FL 33065

Title: V ( ) Delete
Name: JOHN, THOMAS P
Address: 1048 NW FORK ROAD
City-St-Zip: STUART, FL 34994

Title: S ( ) Delete
Name: AJIT, KURIAN
Address: 1405 NW 91ST AVE, APT 14-21
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T ( ) Delete
Name: PHILIP, PHILIP K
Address: 10893 NW 45TH ST
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D ( ) Delete
Name: GEORGE, CHACKO P
Address: 5241 SW 90TH WAY, APT #2
City-St-Zip: COOPER CITY, FL 33328

Title: D ( ) Delete
Name: VARUGHESE, P C
Address: 10895 NW 45TH ST
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: JOHNNY, JOSEPH
Address: 10893 NW 45TH ST
City-St-Zip: CORAL SPRINGS, FL 33065

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

Title: S (X) Change ( ) Addition
Name: AJIT, KURIAN
Address: 8528 SHADOW CT
City-St-Zip: CORAL SPRINGS, FL 33071

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: AJIT KURIAN S 04/29/2007

Electronic Signature of Signing Officer or Director — Date