

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90136 026 ****61.25

DOCUMENT # N47323
 1. Entity Name
EBENEZER INDIA PENTECOSTAL CHURCH, INC.

Principal Place of Business 4040 E 540A LAKELAND FL 33813 US	Mailing Address P.O. BOX 452 HIGHLAND CITY FL 33846
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2. Principal Place of Business 4040 E. 540A	3. Mailing Address P.O. Box 452
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State LAKELAND FLORIDA	City & State HIGHLAND CITY, FL 33846
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Zip 33813	Country U.S.A	Zip 33846	Country
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4. FEI Number 59-3110620	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**PAPPACHEN, GEORGE
 6633 KITTY FOX LANE
 LAKELAND FL 33813**

7. Name and Address of New Registered Agent

Name **VANOJ MATHEW**
 Street Address (P.O. Box Number is Not Acceptable)
1735 S. CIVITIAN AVE
 City **LAKELAND FL** Zip Code **33801**

8. 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 Vanoj Mathew DATE 02/22/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete ABRAHAM, JOY REV 336 RED ROSE CIRCLE ORLANDO FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete JACOB, R 6316 TIERRA VISTA CIRCLE LAKELAND FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete MATHAI, CHAKOCHAN T 3927 LEHMAN CT LAKELAND FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete EAPAN, GEORGE 3746 FEATHER DR LAKELAND FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete PAPPACHEN, GEORGE 6633 KITTY FOX LANE LAKELAND FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition REV. JOY ABRAHAM 336 RED ROSE CIRCLE ORLANDO FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VANOJ MATHEW 1735 S. CIVITIAN AVE LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JOSEPH GEORGE 2343 CHESTERFIELD CIRCLE LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition REJ, VARGHESE 4205 SUNNY GLEN DR LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MATHEW VARGHESE 2324 AVE C.S.W. WINTER HAVEN FL 33880
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vanoj Mathew DATE 02/22/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)