

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007 8:00 am
Secretary of State

02-07-2007 90031 013 ****61.25

DOCUMENT # N47323

1. Entity Name
EBENEZER INDIA PENTECOSTAL CHURCH, INC.



Principal Place of Business
4040E - 540A
LAKELAND, FL 33813 US

Mailing Address
4040E - 540A
LAKELAND, FL 33813 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01252007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3110620

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JACOB, ROY
6316 TIERRA VISTA CIRCLE
LAKELAND, FL 33813

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number Is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Roy Jacob

1/30/07

Signature, typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	THOMAS, GEORGE REV.	
STREET ADDRESS	5541 BEVERLY RISE BLVD	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	JACOB, ROY	
STREET ADDRESS	6316 TIERRA VISTA CIRCLE	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	GEORGE, JOSEPH	
STREET ADDRESS	2343 CHESTERFIELD CIRCLE	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	SAMUEL, K.O.	
STREET ADDRESS	2707 HIGHLANDS CREEK DRIVE	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	PHILLIP, VARUGHESE	
STREET ADDRESS	5266 SAINT LUCIA DRIVE	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	GEORGE PAPPACHEN	
STREET ADDRESS	6633 KITTY FOX LANE	
CITY-ST-ZIP	LAKELAND, FL 33813	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN MATHAI	
STREET ADDRESS	3644 WELLINGTON VIEW	
CITY-ST-ZIP	BARTOW, FL 33830	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 *Roy Jacob*

Date: *1/30/07*