

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37303

FILED
Feb 11, 2016
Secretary of State
CC4598634135

Entity Name: ST. GREGORIOS MALANKARA ORTHODOX SYRIAN CHURCH, INC.

Current Principal Place of Business:

11407 JEFFERSON RD.
THONOTOSASA, FL 33592

Current Mailing Address:

P O BOX 16973
TEMPLE TERRACE, FL 33687 US

FEI Number: 59-2999740

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACOB, JOHN
19126 CHEMILLE DRIVE
LUTZ, FL 33558 US

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: JOHN JACOB

02/11/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT/ THE VICAR
Name PAULOSE, GEORGE REV.FR
Address 9436 HUNTERS POND DRIVE
City-State-Zip: TAMPA FL 33647

Title TREASURER
Name JACOB, SUNNY
Address 8503 PECAN BROOK CT
City-State-Zip: TAMPA FL 33647

Title SECRETARY
Name JACOB, JOHN
Address 19126 CHEMILLE DRIVE
City-State-Zip: LUTZ FL 33558

Title OTHER
Name KALLARAKAL, LEELA
Address 1002 SUMMER BREEZE DR.
City-State-Zip: BRANDON FL 33511

Title OTHER
Name KOSHY, V. G
Address 29609 FOREST GLEN DR
City-State-Zip: WESLEY CHAPEL FL 33543

Title OTHER
Name JOHN, PRASAD
Address 2809 QUIET WATER TRAIL
City-State-Zip: KISSIMMEE FL 34744

Title OTHER
Name JOSE, JABIN
Address 3220 W. DOUGLAS ST.
City-State-Zip: TAMPA FL 33607

Title OTHER
Name VARGHESE, SUNIL M
Address 4419 MERRICK RUN LN
City-State-Zip: VALRICO FL 33596

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: JOHN JACOB

SECRETARY

02/11/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OTHER
Name MATHEW, AJI
Address 20023 TAMIAMI AVE.
City-State-Zip: TAMPA FL 33647