

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37303

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

FILED
Jan 24, 2017
Secretary of State
CC9858707078

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:

JOSE, JABIN THOMAS
9639 TRONCAIS CIR
THONOTOSASSA , FL 33592 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: JABIN JOSE

01/24/2017

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

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

Title SECRETARY
Name JOSE, JABIN
Address 9639 TRONCAIS CIR
City-State-Zip: THONOTOSASSA FL 33592

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

Title TRUSTEE
Name CHERIYAN , BINU
Address 22852 SONOMA LN
City-State-Zip: LUTZ FL 33549

Title OTHER
Name IDICULLA , CHACKO
Address 2013 RIVERCROSSING DR
City-State-Zip: VALRICO FL 33594

Title OTHER
Name ABRAHAM , SUJA
Address 3475 NORTH GRAYHAWK LOOP
City-State-Zip: LECANTO FL 34461

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: JABIN JOSE

SECRETARY

01/24/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OTHER
Name VARGHESE , NITHIN
Address 5413 PASSING PINE LN
City-State-Zip: ZEPHYRHILLS FL 33541