

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2005
Secretary of State

DOCUMENT# N00000001989

Entity Name: ST. MARY'S SYRIAN KNANAYA CHURCH INC.

Current Principal Place of Business:

4310 CLEWIS AVE
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

4310 CLEWIS AVE
TAMPA, FL 33610

New Mailing Address:

FEI Number: 59-3663840 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THYKUTTATHIL, T.M. MATHEW FATHER
1925 E 115TH AVE
TAMPA, FL 33612 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: THYKUTTA-THIL, FR.T.M. MATHEW
Address: 1925 E. 115TH AVENUE
City-St-Zip: TAMPA, FL 33612

Title: T () Delete
Name: ROY, ABRAHAM
Address: 305 RED ELM PL
City-St-Zip: SEFFNER, FL 33584

Title: S () Delete
Name: THOMAS, ALUMMOOTTIL
Address: 5844 BENT GRASS DR
City-St-Zip: VALRICO, FL 33594

Title: D (X) Delete
Name: LIJU, MATHEW
Address: 11135 BRAMBLEBRUSH ST
City-St-Zip: TAMPA, FL 33624

Title: D (X) Delete
Name: BIJOY, JACOB
Address: 14803 CORAL BERRY DR,
City-St-Zip: TAMPA, FL 33626

Title: D (X) Delete
Name: KORAH, SAMUEL
Address: 18301 KEYSTONE GROVES BLVD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: ARUN, PERUMPRAL
Address: 914 LAKE SHORE RANCH DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: S (X) Change () Addition
Name: BIJOY, JACOB
Address: 14803 CORAL BERRY DR,
City-St-Zip: TAMPA, FL 33626

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 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 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: ARUN PERUMPRAL

T

05/07/2005

Electronic Signature of Signing Officer or Director

Date