2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jun 05, 2006 DOCUMENT# N05051 Secretary of State

Entity Name: ST. THOMAS (INDIAN) ORTHODOX CHURCH OF SOUTH FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business:

805 GLENN PARKWAY HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

805 GLENN PARKWAY HOLLYWOOD, FL 33021

FEI Number: 65-0057308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PHILIPOSE, GEORGE REV.FR PYNGOLIL, JOY REV.FR 13077 NW 14TH STREET 6780 56 STREET

PEMBROKE PINES, FL 33028 US VERO BEACH, FL 32967 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: JOY PYNGOLIL 06/05/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

PHILIPOSE, GEORGE REV.FR PYNGOLIL, JOY REV.FR Name: Name: 13077 N.W. 14TH STREET Address: 6780 56 ATREET Address: City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: VERO BAECH, FL 32967

Title: SD () Delete Title: () Change () Addition

GEEVARGHESE, GEORGE Name: Name: Address: 1174 FAIRFIELD MEADOWS Address: City-St-Zip: **DAVIE, FL 33327** City-St-Zip:

Title: () Delete Title: () Change () Addition

PANAGAYIL, ALIAS A Name: Name: 2330 NW 139 AVE Address: Address: City-St-Zip: SUNRSIE, FL 33323 City-St-Zip:

Title: MD () Delete Title: () Change () Addition

Name: VARGHESE, N.C. Name: 13077 NW 14TH STREET Address: Address: City-St-Zip: PEMBROKEPINES, FL 33028 City-St-Zip:

Title: MD () Delete Title: () Change () Addition

VARGHESE, MATHEW Name: Name: 7127 NW 44 STREET Address: Address: CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOY PYNGOLIL Ρ 06/05/2006