

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003369

FILED
Mar 07, 2011
Secretary of State

Entity Name: THE INDIA PENTECOSTAL CHURCH, SOUTH EAST REGION INC.

Current Principal Place of Business:

6670 HILLIS DR.
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

6670 HILLIS DR.
LAKELAND, FL 33813 US

New Mailing Address:

FEI Number: 26-1492687 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SAMUEL, JOHN REV.
6670 HILLIS DR.
LAKELAND, FL 33813 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
Name: CHERIAN, JOHN K REV.
Address: 11540 NW 3RD PLACE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: VP
Name: ABRAHAM, JAMES P REV.
Address: 3017 ELLIS AVE.
City-St-Zip: LAKELAND, FL 33803 US

Title: S
Name: SAMUEL, JOHN REV.
Address: 6670 HILLIS DR.
City-St-Zip: LAKELAND, FL 33813 US

Title: T
Name: STEPHEN, CHACKO MR.
Address: 3851 ALAMANDA HILLS PLACE
City-St-Zip: LAKELAND, FL 33813 US

Title: JS
Name: DANIEL, THOMAS REV.
Address: 28321 GUINEVERE PKWY.
City-St-Zip: CHATTANOOGA, TN 31421 US

Title: JS
Name: ARIYAPPALLIL, RAJAN MR.
Address: 1394 SIDNY POND CIR.
City-St-Zip: LAWRENCEVILLE, GA 30045 US

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 SAMUEL

S

03/07/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date