2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2009
Secretary of State

DOCUMENT# N08000001806

Entity Name: KNANAYA CATHOLIC MISSION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

8670 BYRON AVE.
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

9710 STIRLING ROAD
SUITE 101
COOPER CITY, FL 33024

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

MATHEW, GEORGE P REV.
8670 BYRON AVE.
MIAMI BEACH, FL 33141 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: D ( ) Delete
Name: MATHEW, GEORGE P REV.
Address: 8670 BYRON AVE.
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete
Name: IDICULLA, BABYCHAN
Address: 6906 EAST WEDGEWOOD AVE.
City-St-Zip: DAVIE, FL 33331

Title: D ( ) Delete
Name: NADUPARAMBIL, SANJAIMON K
Address: 4022 TURQUOISE TRAIL
City-St-Zip: WESTON, FL 33331

Title: D ( ) Delete
Name: ABDAHAM, FELIX
Address: 4067 SANDER LING LANE
City-St-Zip: WESTON, FL 33331

Title: D ( ) Delete
Name: SIMON, JOSEPH P
Address: 5951 NW 55TH LANOR
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change ( ) Addition
Name: ABRAHAM, FELIX
Address: 4067 SANDER LING LANE
City-St-Zip: WESTON, FL 33331

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

I hereby certify that the information supplied with this filing does not qualify 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: FELIX ABRAHAM D 07/15/2009
Electronic Signature of Signing Officer or Director — Date