

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 28, 2011
Secretary of State

DOCUMENT# N42530

Entity Name: MALAYALEE ASSOCIATION OF CENTRAL FLORIDA, INC.**Current Principal Place of Business:**6121 W. KIPPS COLONY DR
GULF PORT, FL 33707**New Principal Place of Business:****Current Mailing Address:**6121 W. KIPPS COLONY DR
GULF PORT, FL 33707**New Mailing Address:****FEI Number:** 59-3494676**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**OUSEPH, SHAJU
7804 RIVERWOOD OAKS DR
RIVERVIEW, FL 33578 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: PRES
Name: MATTAMANA, SUNNEY
Address: 2306 FOUNTAIN GRASS DR
City-St-Zip: VALRICO, FL 33594

Title: C
Name: PANAMGATTU, CHERIAN
Address: 6121 W. KIPPS COLONY DR
City-St-Zip: GULF PORT, FL 33707

Title: S
Name: VARGHESE, SHABU
Address: 13717 SPRINGER LANE
City-St-Zip: TAMPA, FL 33625

Title: T
Name: OUSEPH, SHAJU
Address: 7804 RIVERWOOD OAKS DR
City-St-Zip: RIVERVIEW, FL 33569

Title: VC
Name: ILLIKAL, JAMES
Address: 309 CARRIAGE OAK PLACE
City-St-Zip: SEFFNER, FL 33594

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: SHAJU OUSEPH

T

10/28/2011

Electronic Signature of Signing Officer or Director

Date