## **FILE NOW: FILING FEE IS \$61.25**

N93000004710 (0)

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

**FILED** 

Apr 08 1997 8:00am

Secretary of State

1997

5377 NW 80 TERR

PARKLAND FL 33067

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

**DOCUMENT #** 

DIVISION OF CORPORATIONS

| 1. Corporatio                               | KE'S MARTHOMA CHURCH   | , INC. SOUTH FLORI                               | ,<br>DA<br> |                                  |   |  |  |
|---|--|--|-------------|----------------------------------|---|--|--|
| Principal Plac                              | e of Business  | Mailing Address                                  |             |                                  |   |  |  |
| 6454 N.W. 65TH TERRACE<br>PARKLAND FL 33067 |  | 6454 N.W. 65TH TERRACE<br>PARKLAND FL 33067-1547 |             |                                  |   |  |  |
|   |  |  |             |                                  | 10/19/1993  | Date of Lest Report<br>05/01/1996                      |  |
| 2. Principal Place of Business              |  | 2a. Mailing Address                              |             | 4. FEI Number 65-0447074         | Applied For   |  |  |
| Suite, Apt. #, etc.                         |  | 26 Sulte, Apt. #, etc.                           |             |                                  | Not Applicable \$8.75 Additional  |  |  |
| 22  |  |  |             | 5. Certificate of Status Desired | Fee Required  |  |  |
| City & State                                |  | City & State                                     |             | 6. Election Campaign Financing   | 6. Election Campaign Financing \$5.00 May Be  |  |  |
| 23  |  | 28   |             |                                  | Trust Fund Contribution   | Added to Fees  |  |
| Zip   | Country  | Zip  | Coun        | try                              | 8. This corporation has liability for intangi   |  |  |
| 24  | 25<br>9. Name and Address of Current   | 29   | [30]        |                                  | Florida Statutes Yes  10. Name and Address of New Registers   | No No  |  |
|   |  |  |             | 31 Name                          |   | ou Agont   |  |
| KUNCHANDY, GEORGE                           |  |  |             | 0 0                              | SAME  |  |  |
| 6454 N.W. 65TH TERRACE                      |  |  | '           | Street /                         | Address (P.O. Box Number is Not Acceptable)   |  |  |
| PARKLAND FL 33067                           |  |  |             | 33                               |   |  |  |
| 1   |  |  |             | 34 City                          |   | . 85 Zip Code  |  |
| · · ·                                       |  |  | - 1         | 1 7                              | F   | ·L   |  |
|   | to the provisions of Soctions 617.0502 registered agent, or both, in the State of a familiar with, and accept the obligation of the state of the sta |  | HWWDY       | •                                | corporation submits this statement for the purpose poration's board of directors. I hereby accept the a 3//7 required when reinstating)   | e of changing its registered appointment as registered |  |
| 12.   | OFFICERS AND   |  | 13.         |                                  | ADDITIONS/CHANGES TO OFFICERS A   |  |  |
| TITLE                                       | PD   | DELETE   | 1.1 TITL    | Ē                                | PD.   | Change Addition  |  |
| NAME  | GEORGE, P G DR   |  | 1.2 NAN     | 1E                               | GEORGE, P.G. DR.<br>744. NEW TOWN RICHI   | BORS RD  |  |
| STREET ADDRESS                              |  |  |             | EET ADDRESS                      | RICHIBORO PA . 18954  | ~1718  |  |
| CITY-ST-ZIP                                 |  |  |             | '+ST- <b>Z</b> IP                | 448   |  |  |
| TITLE                                       | VD   | 🔀 DELETE   | 21 TITE     | J                                | EHERIAN P. KURIAN.  | Change  Addition                                       |  |
| NAME  |  |  | 2 2 NAN     | EET ADORESS                      | 631. LOWELL . LANG  |  |  |
| STREET ADDRESS                              | 14.000   |  |             | Y-ST-ZIP                         | DAVIE, FL. 33325  |  |  |
| CITY-ST-ZIP                                 | SD SD  | DELETE   | 3 1 TUL     |                                  | 5D.   | Change   |  |
| NAME  | KUNCHANDY, GEORGE  |  | 3 2 NAN     | I                                | i province  | •  |  |
| STREET ADDRESS                              | DORESS 6454 NW 65 TERR   |  |             | EET ADDRESS                      | 6434 NWIGSTERRS   |  |  |
| CITY-ST-ZIP                                 |  |  | 3 4. CIT    | Y - ST - ZIP                     |   |  |  |
| TITLE                                       | D  | . DELETE   | 4.1 THTL    | Ę ,                              | D.  | Change Addition  |  |
| NAME  | KOSHY, M. V  | 4.2  |             | ME                               | SAZA. NE. SIN AVE   |  |  |
| STREET ADDRESS                              | 5424 NE 5 AVE  |  | 4.3 STR     | EET ADDRESS                      | FT. LAUDERDALE FL.  | 5525A.   |  |
| CITY-ST-ZIP                                 | FT LAUDERDALE FL 33334   |  | 4.4 City    | - ST- ZIP                        | La. TANDERDARE LA.  |  |  |
| TITLE                                       | D  | <b>▼</b> DELETE                                  | 5.1 TITL    | € •                              | JOHN. PHILIPOSE   | Change   |  |
| NAME  | MATHAI, SAMUEL   |  | 5.2 NAM     | <b>%</b>                         | 6217. NW. 75 WAY  |  |  |
| CERTET ADDOCCC                              | 5277 NW RO TERR  |  | 6 2 2 10    | CT ADDDCCC                       | Complete Line and the |  |  |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 If changed, or on an attachment with an address.

PARKLAND . FL. 33067

☐ Change

☐ Addition

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.4 CITY-S1-ZIP

6.1 TITLE

6.2 NAME

DELETE